INSTRUCTIONS FOR COMPLETING THE RADIATION SAFETY COURSE APPLICATION

These application instructions will guide you in providing documentation to demonstrate your radiation safety course will be compliant with all regulations and statutes that apply to it. It is your responsibility to provide thorough documentation of compliance.

Familiarize yourself with regulations governing radiation safety courses by referencing the digital version of California Code of Regulations, title 16, sections 1014, 1014.1, 1070, and 1070.1. Statutory definitions related to dental assisting educational courses are found on the LegInfo website; consult Business and Professions Code section 1741.

- Complete the application in its entirety.
- Submit one hard copy of the application, supporting documentation, and application fee by mail.
- Once your submission is received, no addenda or amendments will be accepted prior to the Board's initial review.
- Label the supporting documentation to match the question numbers in the application. Attach the documents to the completed application form. Applications must have correct and consistent numbering and labeling of documentation to be accepted.
- Two forms (forms 1 and 2) are provided at the end of the application (pages 9–11). You must complete, sign, date, and return these forms with your application.
- Four samples of supporting documentation are provided on pages 13–16 of these instructions, as a courtesy. The samples are provided for reference only. Documentation is not required to resemble the samples or maintain the same format.

If you have questions about the application, required forms, samples, instructions, or regulations, please email LPCU.DBC@dca.ca.gov. Board staff respond to emails within 48 hours.

TABLE OF CONTENTS

APPLICATION INSTRUCTIONS

Please Note: Supporting documentation is required to be submitted for only the questions listed below.

COURSE INFORMATION (APP. PAGE 1)

QUESTION 1: The course provider is the school or organization providing the course. The course provider name entered on the application must match the provider name on the student certificate of completion. Make sure there are no typos or inaccuracies in the provider name.

NOTE: The provider name cannot be changed once the course has been approved. If you want to change the provider name after approval, you must submit a new application under the new name.

QUESTION 2: The educational facility address is where course instruction will take place.

NOTE: If the application is approved, the approval is only valid for this one location. To offer the course at another location, you must submit a separate course application for each additional location.

QUESTION 7: To be able to answer "Yes" to this question, the agency must meet the following definition of accrediting or approving agency: An organization that evaluates and monitors educational institutions, programs, or courses for compliance with established standards. For example, the California Bureau for Private Postsecondary Education is considered an approving agency.

NOTE: Courses and course providers are NOT required to have accreditation or approval from another agency.

QUESTION 8: If the course or course provider is accredited or approved by another agency, submit proof of accreditation or approval for all accrediting or approving agencies.

COURSE DIRECTOR INFORMATION (APP. PAGE 2)

QUESTIONS 15–16: Submit proof of licensure. Examples: a copy of the current, active license issued by the Board or DHBC, or a printout from the DCA License Search webpage. The course director must have been licensed for two years and possess a valid, active, and current license as a dentist, RDA, or RDAEF issued by the Board, or as an RDH, RDHEF, or RDHAP issued by the DHBC. (16 CCR §§ 1014.1(c)(1)-(2); 1070(b))

QUESTION 18: Submit a copy of the completion certificate showing the course director completed a Board-approved radiation safety course.

QUESTION 20: Submit a copy of the completion certificate showing the course director completed a two-hour methodology course that included clinical evaluation criteria, course outline development, and standard-of-performance evaluations. Alternatively, if the certificate does not specify clinical evaluation and course outline development, submit evidence that the completed methodology course included content in these areas. (CCR § 1014.1(c)(2))

QUESTION 21: Submit a copy of a valid certification card in basic life support (BLS) procedures, including cardiopulmonary resuscitation. The Board accepts BLS certification cards from the following providers: the American Red Cross, the American Heart Association, the American Safety and Health Institute, the American Dental Association's Continuing Education Recognition Program, or the Academy of General Dentistry's Program Approval for Continuing Education. (16 CCR § 1070(h))

QUESTIONS 22–25: Submit the required Course Director Acknowledgment of Responsibilities form (Form 1, pages 9–10 of the application) signed and dated by the course director.
(16 CCR §§ 1005(b)(2); 1014.1(b); 1070(b)(1)-(3), (c), (h), (j)(2)-(3))

COURSE INSTRUCTOR INFORMATION (APP. PAGE 3)

QUESTION 26: Submit the List of Approved Faculty form (Form 2, page 11 of the application) signed and dated by the course director.

QUESTIONS 27–28: Submit proof of licensure for each instructor. Examples: a copy of the license issued by the Board or DHBC or a printout from the DCA License Search webpage. Instructors must be licensed for two years and possess a valid, active, and current license as a dentist, RDA, or RDAEF issued by the Board, or as an RDH, RDHEF, or RDHAP issued by the DHBC. (16 CCR §§ 1014.1(c)(1)-(2); 1070(d))

QUESTION 29: Submit supporting documentation. Examples: resume, professional biography, certifications, and other credentials. (16 CCR §§ 1014.1(c)(2); 1070(d))

QUESTION 30: Submit a copy of the completion certificate showing each instructor completed a Board-approved radiation safety course.

QUESTION 31: Submit a copy of the completion certificates showing that each instructor completed a two-hour methodology course that included clinical evaluation criteria, course outline development, and standard-of-performance evaluations. Alternatively, if the certificate does not specify clinical evaluation and course outline development, submit evidence that the completed methodology course included content in these areas. (CCR § 1014.1(c)(2))

QUESTION 32: Submit a copy of a valid certification card in basic life support (BLS) procedures, including cardiopulmonary resuscitation, for each instructor. The Board accepts BLS certification cards from the following providers: the American Red Cross, the American Heart Association, the American Safety and Health Institute, the American Dental Association's Continuing Education Recognition Program, or the Academy of General Dentistry's Program Approval for Continuing Education. (16 CCR § 1070(h))

COURSE PREREQUISITES (APP. PAGE 3)

QUESTIONS 33–34: Submit supporting documentation. Example: a document stating evidence of required prerequisites will be collected from students prior to course enrollment, and that the course director will keep a copy of this evidence in the student records. (BPC § 1750(c); 16 CCR §§ 1014.1(b)(2)(C); 1070(b)(1), (h))

COURSE HOURS (APP. PAGE 3)

QUESTION 35: The required minimum number of hours of total instruction is 32 hours. (16 CCR § 1014.1(i))

QUESTION 36: The required minimum number of hours for didactic instruction is eight hours; the required minimum number of hours for laboratory instruction is 12 hours; the required minimum number of hours of clinical instruction is 12 hours. (16 CCR § 1014.1(i))

INSTRUCTIONAL AND FACILITY RATIOS (APP. PAGE 3)

QUESTION 37: Provide the maximum number of students enrolled in the course at any one time. This information is needed to verify compliance with facilities, equipment, scheduling, and instructor-student ratio requirements.
(16 CCR §§ 1014.1(d)(1), (f), (g); 1070(f); 1070.1(a))

FACILITIES, OPERATORIES, EQUIPMENT, AND ARMAMENTARIA (APP. PAGE 4)

QUESTION 42: Submit a course schedule specifying the educational facility where instruction will be provided; the educational facility's days and hours of operation; the days, times and location of each class; the type of instruction for each class; the number of students enrolled at any one time; the number of instructors; and the number of operatories. For each type of instruction, the hours indicated on the schedule must add up correctly to the number of hours stated on the application form (questions 36–37). See page 13 of these instructions for sample course schedule.
(16 CCR §§ 1070(f), (f)(2); 1070.3(f), (g)(6)-(7))

QUESTIONS 43–51: Submit a diagram of the instructional facility with dimensions that include laboratory/laboratories with sterilization area(s), developing facilities, viewing spaces, X-ray areas, operatories, and the location of all required equipment and armamentaria. If the course will offer all didactic instruction online, the diagram does not need to include a lecture classroom (see question 66). (16 CCR §§ 1014.1(d), (f); 1070(f)-(g))

QUESTIONS 52–55: Submit documentation that each radiographic operatory is equipped with supplies and equipment for practical work, including:

- At least one functioning radiography machine adequately filtered and collimated in compliance with Department of Health Care Services regulations and is equipped with the appropriate position-indicating devices for each technique being taught.
- Equipment, armamentaria, and supplies required to teach radiation safety, accessible to students and in sufficient quantity.
- Equipment, armamentaria, and supplies needed to follow infection control protocols complying with the Board's Minimum Standards for Infection Control.

(16 CCR §§ 1005; 1014.1(d)(1)-(2), (f), (f)(1), (g)(1); 1070(f)(1), (2)(A))

NOTE: Students are required to complete some procedures using analog film. Traditional film packets must be double film. (16 CCR § 1014.1(f)(1), (g)(1))

INFECTION CONTROL AND EMERGENCY MANAGEMENT (APP. PAGE 5)

QUESTION 57: Submit the course clinical and laboratory protocols ensuring 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. For information on the required contents of the protocols, see the Guide to Infection Control Requirements on pages 10–12 of these instructions. (16 CCR §§ 1005; 1014.1(d); 1070(g))

QUESTION 58: Submit documentation explaining how the protocols described in question 57 will be provided to all students, faculty, and instructional staff. (16 CCR §1070(g))

QUESTION 59: Submit the course protocol for instrument processing, operatory cleanliness, and management of injuries, and a description of how it will be maintained and periodically updated. (16 CCR § 1005(b)(2))

QUESTION 60: Submit documentation explaining how the protocol described in question 59 will be made available to all dental health care personnel. (16 CCR § 1005(b)(2))

QUESTION 61: Submit a photograph verifying that a copy of the Minimum Standards for Infection Control is posted in the lab area where everyone can see them. (16 CCR § 1005(b)(3))

QUESTION 62: Submit a copy of the written policy on managing emergency situations. (16 CCR § 1070(h))

QUESTION 63: Submit documentation explaining how the policy described in question 62 will be made available to all students, faculty, and instructional staff. (16 CCR § 1070(h))

COURSE OUTLINE AND CURRICULUM CONTENT (APP. PAGE 5)

QUESTION 64: Submit a detailed course outline that includes all the content listed in question 64. Make sure the course outline includes laboratory instruction as described in question 71 and clinical instruction as described in questions 74–77. (16 CCR §§ 1014.1(e)(1)-(2); 1070(i))

Note: The names of the areas of instruction must match the titles listed in 16 CCR § 1014.1(e)(4). The titles are listed in the following table.

AREA TITLE	CITATION
Radiation physics and biology.	16 CCR § 1014.1(e)(4)(A)
Radiation protection and safety.	16 CCR § 1014.1(e)(4)(B)
Recognition of normal anatomical landmarks and abnormal conditions of the oral cavity as they relate to dental radiographs.	16 CCR § 1014.1(e)(4)(C)
Radiograph exposure and processing techniques using either manual or automatic methods.	16 CCR § 1014.1(e)(4)(D)
Radiograph mounting or sequencing, and viewing, including anatomical landmarks of the oral cavity.	16 CCR § 1014.1(e)(4)(E)
Intraoral techniques and dental radiograph armamentaria, including holding devices.	16 CCR § 1014.1(e)(4)(F)
Interproximal examination including principles of exposure, methods of retention and evaluation.	16 CCR § 1014.1(e)(4)(G)
Intraoral examination including principles of exposure, methods of retention and evaluation.	16 CCR § 1014.1(e)(4)(H)
Identification and correction of faulty radiographs.	16 CCR § 1014.1(e)(4)(I)
Supplemental techniques including the optional use of computerized digital radiography.	16 CCR § 1014.1(e)(4)(J)
Infection control in dental radiographic procedures.	16 CCR § 1014.1(e)(4)(K)
Radiographic record management.	16 CCR § 1014.1(e)(4)(L)

QUESTION 65: Submit curriculum content, covering each area of instruction. Examples of curriculum content include PowerPoint slides, lesson plans, and photocopies of textbook chapters used in the course. The names of the areas of instruction in the curriculum content must match the names of the areas of instruction in the course outline, and both must match the titles listed in 16 CCR § 1014.1(e). (16 CCR §§ 1014.1(e); 1070(i))

CLINICAL INSTRUCTION (APP. PAGES 6–7)

QUESTION 72: Select “extramural dental facility” if the course is utilizing a facility meeting the following definition: any clinical facility utilized … for instruction in dental assisting existing outside or beyond the walls, boundaries or precincts of the primary location of the Board-approved program and in which dental treatment is rendered.
(16 CCR §§ 1070(j)(1),1070.1(c)).

QUESTIONS 79–80: Submit proof of licensure for the supervising dentist. Examples: a copy of the current, active dentist license issued by the Board or a printout from the DCA License Search webpage. (16 CCR §§ 1014.1(g)(1))

EXTRAMURAL DENTAL FACILITY INFORMATION (APP. PAGES 7–8)

QUESTION 81: If the course is using instructors to provide clinical instruction in an extramural dental facility, include these instructors on the List of Approved Faculty (Form 2). As you would do for instructors teaching at the primary course facility, submit proof of experience in performing, teaching, and evaluating dental radiographs; evidence that they have completed a two-hour methodology course in clinical evaluation; evidence that they have completed a Board-approved radiation safety course; and a copy of their valid certification card in BLS.
(16 CCR §§ 1014.1(c); 1070(d), (h))

QUESTION 82: Provide supporting documentation. Examples: Written policy or statement from the course director on how extramural dental facilities are chosen. (16 CCR § 1070(j)(2))

QUESTIONS 83–84: Submit orientation materials to be provided to dentists and licensed dental health care personnel at each extramural dental facility. The materials must be clearly labeled as orientation materials and reference questions 83–84. The materials must include information on how the course will provide orientation to dentists and licensed dental health care personnel at the extramural dental facility, as well as all the content listed in question 84.
(16 CCR § 1070(j)(3))

QUESTION 85: Provide a written explanation of how clinical instruction at the extramural dental facility will be organized, planned, and supervised.

QUESTIONS 86–87: Submit at least one signed, dated, and fully executed written contract of affiliation with an extramural dental facility already chosen by the course director. Make sure the contract of affiliation includes the following required content:

- Affirmation of compliance with the regulations of CCR, Title 16, Division 10, Chapter 3, Article 2 (16 CCR §§ 1070 and 1070.1).
- Description of the settings in which the clinical training will be received.
- Provision that the clinical facility has the necessary equipment and accessories appropriate for the procedures to be performed.
- Provision that such equipment and accessories are in safe operating condition.

(16 CCR §§ 1014.1(h); 1070(j)(4))

EVALUATIONS, EVALUATION CRITERIA, AND EXAMINATIONS (APP. PAGE 7)

QUESTION 88: Submit documentation that when students are assessed for competence in radiographic record management, they can obtain credit by use of challenge examinations and other methods of evaluation.
(16 CCR § 1014.1(e)(4)(L))

QUESTION 89: Submit documentation of how the course will assess that the student has demonstrated minimum competence in laboratory performance of radiographic techniques. Examples of acceptable documentation include a laboratory performance evaluation form or practical examination upon completion of laboratory instruction. Make sure the documentation includes evaluation of the procedures listed in question 71. See page 14 of these instructions for sample Laboratory Evaluation Form. Along with the documentation, submit the objective evaluation criteria that will be provided to the student for this assessment. The objective evaluation criteria must include:

- Objective evaluation criteria for each component of a performance-evaluated procedure, including objectives for all performance-evaluated procedures.
- The minimum number of satisfactory performances required for each performance-evaluated procedure.
- The steps causing the student to fail the performance-evaluated procedures.
- A description of each of the grades that may be assigned.

(16 CCR §§ 1014.1(e), (f); 1070(f)(2)(C), (i)(1)-(3))

QUESTION 90: Submit documentation that students will complete a clinical examination demonstrating clinical competency in radiographic techniques. Examples of acceptable documentation include a performance evaluation form labeled for use with the clinical examination. Make sure the documentation includes evaluation of the procedures listed in question 75. See page 15 of these instructions for sample Clinical Evaluation Form. Along with the documentation, submit the objective evaluation criteria to be provided to the student for the clinical examination. The objective evaluation criteria must include:

- Objective evaluation criteria for each component of a performance-evaluated procedure, including objectives for all performance-evaluated procedures.
- The minimum number of satisfactory performances required for each performance-evaluated procedure.
- The steps causing the student to fail the performance-evaluated procedures.
- A description of each of the grades that may be assigned.

(16 CCR §§ 1014.1(e), (g); 1070(f)(2)(C), (i)(1)-(3))

QUESTION 91: Submit a copy of the written examination outline. The names of the topics tested on the written examination must be consistent with the names of the areas of instruction indicated on the course outline (question 64) and in the course curriculum (question 65). The wording in regulations must be followed. Along with the examination outline, submit the grading criteria to be provided to the student.

(16 CCR §§ 1014.1(e)(3), (j); 1070(i)(3))

COURSE CERTIFICATE OF COMPLETION (APP. PAGE 7)

QUESTION 92: Submit a copy of the course certificate of completion. See page 16 of these instructions for a sample certificate. Note the following:

- The course provider name and course address on the certificate must be exactly the same as those provided on the application form (questions 1–2).
- The total hours of the course must reflect the total hours presented in the application and must be a minimum of 32 hours.
- The dates of completion of the course must be labeled “Dates of Completion of Course” and must include a start date and an end date.
- The name of the course must be “Radiation Safety Course.”
- A space for the Board-Issued approval number must be included and labeled “Board-Issued Approval Number.”
- The certificate must include the signature of the course provider, director, administrator, or their designee. The signature may be wet or computer-generated, but it cannot be typed.

(BPC § 1741(e); 16 CCR §§ 1014.1(j); 1070(e))

ACRONYMS

BPC: Business and Professions Code

CCR: California Code of Regulations; Note: 16 CCR § 1070, (i) refers to title 16, section 1070, subsection (i) in the California Code of Regulations.

DHBC: Dental Hygiene Board of California

DHCP: Dental Health Care Personnel

EDC: Education Code

OPIM: Other Potentially Infectious Materials

RDA: Registered Dental Assistant

RDAEF: Registered Dental Assistant in Extended Functions

GLOSSARY

The following terms are defined by the California Code of Regulations (CCR). When these terms are used in the application and instructions, they refer to the specific definition in the CCR.

"**Board**" refers to the Dental Board of California.

"**Certificate of completion**" means a certificate that shall include, at minimum, the participant's name; the name of the completed course; the course provider name; the Board-issued approval number; the date or date range of completion of the course; the number of completed hours of the course; and the signature of the course provider, director, administrator, or their designee, verifying the participant has successfully completed the course. (BPC § 1741(e))

"Clinical instruction" means instruction in which students receive supervised experience in performing procedures in a clinical setting on patients. Clinical procedures shall only be allowed upon successful demonstration and evaluation of laboratory and preclinical skills. (16 CCR § 1070.1(a))

"Course director" means the person who is responsible for all the activities listed in the "Course Director Acknowledgement of Responsibilities." The course director is not required to have the official title of "course director" within the organization. (16 CCR §§ 1014.1(b); 1070(b)-(c), (h), (j))

"**Didactic instruction**" means lectures, demonstrations, and other instruction involving theory that may or may not involve active participation by students. The faculty or instructional staff of an educational institution or approved provider may provide didactic instruction via electronic media, home study materials, or live lecture modality. (16 CCR § 1070.1(b))

"**Laboratory instruction**" means instruction in which students receive supervised experience performing procedures using study models, mannequins, or other simulation methods. (16 CCR § 1070.1(d))

"Preclinical instruction" means instruction in which students receive supervised experience within the educational facilities performing procedures on simulation devices or patients who are limited to students, faculty, or instructional staff members. (16 CCR § 1070.1(e))

"**Dental health care personnel (DHCP)**" means all paid and non-paid personnel in the dental health care setting, including a laboratory or clinical facility, who might be occupationally exposed to infectious materials, including body substances and contaminated supplies, equipment, environmental surfaces, water, or air. DHCP includes dentists, dental hygienists, dental assistants, dental laboratory technicians (in-office and commercial), students and trainees, contractual personnel, and other persons not directly involved in patient care but potentially exposed to infectious agents (e.g., administrative, clerical, housekeeping, maintenance, or volunteer personnel). (16 CCR § 1005(a)(13))

"Extramural dental facility" means any clinical facility utilized by a Board-approved dental assisting educational course for instruction in dental assisting that exists outside or beyond the walls, boundaries or precincts of the primary location of the Board-approved course and in which dental treatment is rendered. Extramural dental facilities may only be used for clinical instruction; laboratory and preclinical instruction shall not be provided in an extramural dental facility. (16 CCR §§ 1070(j)(1),1070.1(c))

"**Other potentially infectious materials**" (OPIM) means any one of the following: (16 CCR § 1005(a)(12))

(A) Human body fluids, such as saliva in dental procedures, any body fluid visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids.

(B) Any unfixed tissue or organ (other than intact skin) from a human (living or dead).

(C) Any of the following, if known or reasonably likely to contain or be infected with human immunodeficiency virus (HIV), hepatitis B virus (HBV), or hepatitis C virus (HCV):

1. Cell, tissue, or organ cultures from humans or experimental animals;
2. Blood, organs, or other tissues from experimental animals; or
3. Culture medium or other solutions.

GUIDE TO INFECTION CONTROL REQUIREMENTS

The following required content must appear in the written clinical and laboratory protocols for infection control. These requirements are specified in 16 CCR § 1005.

1. Attestation that all dental health care personnel (DHCP) comply with infection control precautions.
2. Attestation that the course will enforce all of the following minimum precautions to protect patients and DHCP and minimize the transmission of pathogens in health care settings as mandated by Cal/OSHA:

    a. Standard precautions shall be practiced in the care of all patients.

    b. A written protocol shall be developed, maintained, and periodically updated for proper instrument processing, operatory cleanliness, and management of injuries. This protocol will be made available to all DHCP involved in the course including students, faculty, and instructional staff.

    c. A copy of CCR, title 16, section 1005 "Minimum Standards for Infection Control" shall be posted where laboratory instruction is performed and where everyone can see it.

    d. All DHCP shall wear surgical facemasks in combination with either chin length plastic face shields or protective eyewear whenever there is potential for aerosol spray, splashing or spattering of the following: droplet nuclei, blood, chemical or germicidal agents or OPIM. Chemical-resistant utility gloves and appropriate, task-specific PPE shall be worn when handling hazardous chemicals. After each patient treatment, masks shall be changed and disposed of. After each patient treatment, face shields and protective eyewear shall be cleaned, disinfected, or disposed of.

    e. Protective attire shall be worn for disinfection, sterilization, and housekeeping procedures involving the use of germicides or handling contaminated items. All DHCP shall wear reusable or disposable protective attire whenever there is a potential for aerosol spray, splashing or spattering of blood, OPIM, or chemicals and germicidal agents. Protective attire must be changed daily or between patients if they should become moist or visibly soiled. All PPE used during patient care shall be removed when leaving laboratories or areas of patient care activities. Reusable gowns shall be laundered in accordance with Cal/OSHA Bloodborne Pathogens Standards (8 CCR § 5193).

    f. All DHCP shall thoroughly wash their hands with soap and water at the start and end of each workday. DHCP shall wash contaminated or visibly soiled hands with soap and water and put on new gloves before treating each patient. If hands are not visibly soiled or contaminated, an alcohol-based hand rub may be used as an alternative to soap and water. Hands shall be thoroughly dried before donning gloves to prevent promotion of bacterial growth and washed again immediately after glove removal. A DHCP shall refrain from providing direct patient care if hand conditions are present that may render DHCP or patients more susceptible to opportunistic infection or exposure. (16 CCR § 1005(b)(6)).

g. All DHCP who have exudative lesions or weeping dermatitis of the hand shall refrain from all direct patient care and from handling patient care equipment until the condition resolves.

h. Medical exam gloves shall be worn whenever there is contact with mucous membranes, blood, OPIM, and during all pre-clinical, clinical, post-clinical, and laboratory procedures. When processing contaminated sharp instruments, needles, and devices, DHCP shall wear heavy-duty utility gloves to prevent puncture wounds. Gloves must be discarded when torn or punctured, upon completion of treatment, and before leaving laboratories or areas of patient care activities. All DHCP shall perform hand hygiene procedures before donning gloves and after removing and discarding gloves. Gloves shall not be washed before or after use.

I. Needles shall be recapped only by using the scoop technique or a protective device. Needles shall not be bent or broken for the purpose of disposal. Disposable needles, syringes, scalpel blades, or other sharp items and instruments shall be placed into sharps containers for disposal as close as possible to the point of use according to all applicable local, state, and federal regulations.

J. All germicides must be used in accordance with intended use and label instructions.

k. Cleaning must precede any disinfection or sterilization process. Products used to clean items or surfaces prior to disinfection procedures shall be used according to all label instructions.

l. Critical instruments, items and devices shall be discarded or pre-cleaned, packaged or wrapped and sterilized after each use. Methods of sterilization shall include steam under pressure (autoclaving), chemical vapor, and dry heat. If a critical item is heat-sensitive, it shall, at minimum, be processed with high-level disinfection and packaged or wrapped upon completion of the disinfection process. These instruments, items, and devices shall remain sealed and stored in a manner so as to prevent contamination, and shall be labeled with the date of sterilization and the specific sterilizer used if more than one sterilizer is utilized in the facility.

m. Semi-critical instruments, items, and devices shall be pre-cleaned, packaged or wrapped and sterilized after each use. Methods of sterilization include steam under pressure (autoclaving), chemical vapor and dry heat. If a semi-critical item is heat sensitive, it shall, at minimum, be processed with high level disinfection and packaged or wrapped upon completion of the disinfection process. These packages or containers shall remain sealed and shall be stored in a manner to prevent contamination, and shall be labeled with the date of sterilization and the specific sterilizer used if more than one sterilizer is utilized in the facility.

n. Non-critical surfaces and patient care items shall be cleaned and disinfected with a California Environmental Protection Agency (Cal/EPA)-registered hospital disinfectant (low-level disinfectant) labeled effective against HBV and HIV. When the item is visibly contaminated with blood or OPIM, a Cal/EPA-registered hospital intermediate-level disinfectant with a tuberculocidal claim shall be used.

o. All high-speed dental hand pieces, low-speed hand pieces, rotary components and dental unit attachments such as reusable air/water syringe tips and ultrasonic scaler tips, shall be packaged, labeled and heat-sterilized in a manner consistent with the same sterilization practices as a semi-critical item.

p. Single use disposable items such as prophylaxis angles, prophylaxis cups and brushes, tips for high-speed evacuators, saliva ejectors, air/water syringe tips, and gloves shall be used for one patient only and discarded.

q. Proper functioning of the sterilization cycle of all sterilization devices shall be verified at least weekly using a biological indicator (such as a spore test). Test results shall be documented and maintained for 12 months

r. Sterile coolants/irrigants shall be used for surgical procedures involving soft tissue or bone. Sterile coolants/irrigants must be delivered using a sterile delivery system.

s. If non-critical items or surfaces likely to be contaminated are manufactured in a manner preventing cleaning and disinfection, they shall be protected with disposable impervious barriers. Disposable barriers shall be changed when visibly soiled or damaged and between patients.

t. Clean and disinfect all clinical contact surfaces that are not protected by impervious barriers using a California Environmental Protection Agency (Cal/EPA) registered, hospital grade low- to intermediate-level germicide after each patient. The low-level disinfectants used shall be labeled effective against HBV and HIV. Use disinfectants in accordance with the manufacturer's instructions. Clean all housekeeping surfaces (e.g. floors, walls, sinks) with a detergent and water or a Cal/EPA registered, hospital grade disinfectant. Products used to clean items or surfaces prior to disinfection procedures shall be clearly labeled and DHCP shall follow all material safety data sheet (MSDS) handling and storage instructions.

u. Dental unit water lines shall be anti-retractive. At the beginning of each workday, dental unit lines and devices shall be purged with air or flushed with water for at least two minutes prior to attaching handpieces, scalers, air water syringe tips, or other devices. The dental unit lines and devices shall be flushed between each patient for a minimum of 20 seconds.

v. Contaminated solid waste shall be disposed of according to applicable local, state, and federal environmental standards.

w. Splash shields and equipment guards shall be used on dental laboratory lathes. Fresh pumice and a sterilized or new rag-wheel shall be used for each patient. Devices used to polish, trim, or adjust contaminated intraoral devices shall be disinfected or sterilized, properly packaged or wrapped and labeled with the date and the specific sterilizer used if more than one sterilizer is utilized in the facility. If packaging is compromised, the instruments shall be recleaned, packaged in new wrap, and sterilized again. Sterilized items will be stored in a manner to prevent contamination.

x. All intraoral items such as impressions, bite registrations, prosthetic and orthodontic appliances shall be cleaned and disinfected with an intermediate-level disinfectant before manipulation in the laboratory and before placement in the patient's mouth. Such items shall be thoroughly rinsed prior to placement in the patient's mouth.

(8 CCR §§ 3203-3205.3, 5193, 5199)

SAMPLE 1: RADIATION SAFETY COURSE SCHEDULE
(QUESTION 42)

RADIATION SAFETY COURSE SCHEDULE

Maximum number of students enrolled in the course at one time: _____

Educational facility location: Acme Dental Office, 123 Sample St., Normaltown, CA 90000

Days and hours of operation: Saturday, 9am – 6 pm; Sunday 9am – 5 pm

DIDACTIC INSTRUCTION	
Class Title:	Radiation Safety Didactic Instruction
Type of Instruction:	Didactic
Day, start time, end time:	Day 1, 8 am - 12 pm (4 hours) Day 1, 1 pm – 5 pm (4 hours)
Names of Instructor(s):	Sally Jones
Number of students in the class:	
Location of class:	Lecture room/123 Sample St, Normaltown, CA 90000

LABORATORY INSTRUCTION	
Class Title:	Radiation Safety Laboratory Instruction
Type of Instruction:	Laboratory
Day, start time, end time:	Day 1, 2 pm - 6 pm (4 hours)
Names of Instructor(s):	Sally Jones
Number of Bench Mounts/ Typodonts:	Day 2, 8 am – 12 pm (4 hours) Day 2, 1 pm – 5 pm (4 hours) Day 3, 8 am – 12 pm (4 hours)
Number of students in the class:	
Location of class:	Laboratory space/123 Sample St, Normaltown, CA 90000

CLINICAL INSTRUCTION	
Class Title:	Radiation Safety Clinical Instruction
Type of Instruction:	Clinical
Day, start time, end time:	Day 3, 1 pm – 5 pm (4 hours) Day 4, 8 am – 12 pm (4 hours) Day 4, Day 4, 1 pm – 5 pm (4 hours)
Names of Instructor(s):	Sally Jones
Number of students in each class session:	
Location of class:	Operatory/123 Sample St, Normaltown, CA 90000
Number of Operatories:	

SAMPLE 2A: EVALUATION FORM: LABORATORY PERFORMANCES
(QUESTIONS 89–90)

SAMPLE LABORATORY MANIKIN EVALUATION FORM: FULL-MOUTH X-RAY (FMX)

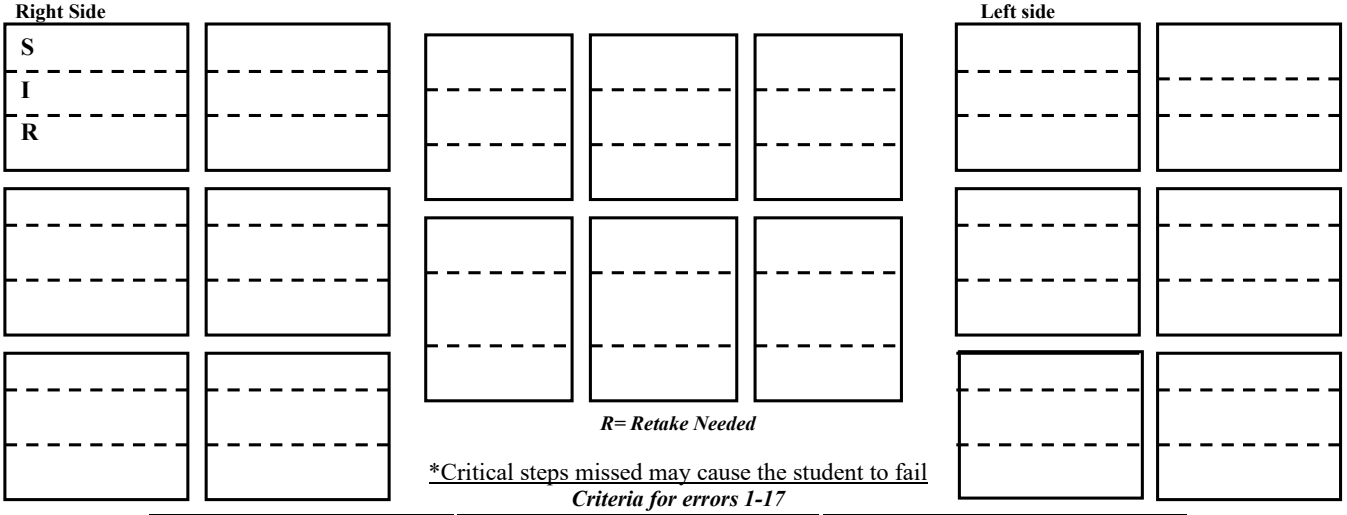
Student's Name _____ **Date** _____ **Instructor's Signature** _____ ***Final Score*** _____***/100***
Total No. of Retakes _____ **Film (1 FMX minimum) Digital (1, 2 ,3 FMX minimum)**

Objective: The student will expose, process, and evaluate two full mouth sets of radiographs of diagnostic quality.
Instructions: Use one evaluation form per set**.** Expose 18 Images using the given criteria for diagnostic quality:(S) Student and (I)Instructor review radiographs and use criteria below (1-17) to write down any error(s) present. Place number(s) for error(s) in corresponding box. Mark (E) or (A) in the corresponding box. Once the student completes the self-evaluation, an instructor will evaluate the FMX and note any retakes (R). Only an instructor can authorize retakes. If more than three retakes, the student will seek remedial assistance to meet competency level prior to exposing more radiographs.

Grading: Minimum number of satisfactory procedures: 2 **Minimum passing score is 75/100.**

Full Mouth (FMX) Manikin; Exposure of 18 Film/Images ___**/90 point**. Each error -1 deduction, Retakes -5 deduction (NO more than three retakes).
* Followed infection control guidelines to include PPE's ___**/5 points**. *Followed all student safety guidelines ___**/5 points**. ***Each*** error -1 deduction.

Right Side **Left side**



R= Retake Needed

*Critical steps missed may cause the student to fail

Criteria for errors 1-17

1.Process/ Mounted incorrectly	7. Apices cut off	13. Film/Image Bent
2. Image receptor too far anterior	8. Occlusal/incisal cut off	14. Incorrect holder assembled/used
3. Image receptor too far posterior	9. Foreshortened (too great vertical)	15. Receptor/holder not parallel/teeth
4. Image has cone cut	10. Elongated (insufficient vertical)	16. **OTHER***
5. Overlapped mesial/distal angle	11. Image receptor reversed	17. **Incorrect safety procedures/IC***

E-- Excellent: Perfect Image with no technical errors
A—Acceptable meets diagnostic quality, Image with minor technical errors (1-17)
R—Not Acceptable: Retake; Technical errors that are unacceptable for diagnostic quality.

SAMPLE 2B: EVALUATION FORM: CLINICAL PERFORMANCES
(QUESTIONS 89–90)

Note: Clinical performance evaluation form used for the clinical examination (Patient 4) should be labeled to indicate use for the clinical examination.

SAMPLE CLINICAL EVALUATION FORM: FULL-MOUTH X-RAY (FMX)

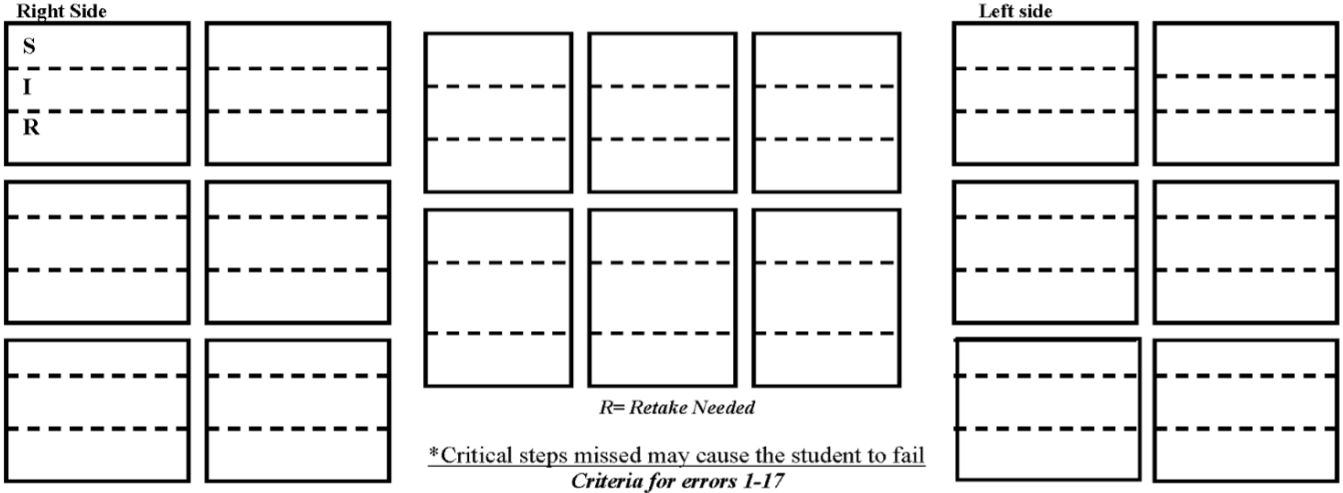
Student's Name _____ **Date** _____ **Instructor's Signature** _____ *Final Score* _____*/100*
Patient's Name _____ **Total No. of Retakes** _____ **Film (1 FMX minimum) Digital (1, 2 ,3 FMX minimum)**

Attach Prescription to take radiographs: DDS Name _____ **License** _____
Objective: The student will expose, process, and evaluate four full mouth sets of radiographs of diagnostic quality.
Instructions: Use one evaluation form per patient. Expose 18 Images using the given criteria for diagnostic quality:(S) Student and (I)Instructor review radiographs and use criteria below (1-17) to write down any error(s) present. Place number(s) for error(s) in corresponding box. Mark (E) or (A) in the corresponding box. Once the student completes the self-evaluation, an instructor will evaluate the FMX and note any retakes (R). Only an instructor can authorize retakes. If more than three retakes, the student will seek remedial assistance to meet competency level prior to exposing more radiographs.

Grading: Minimum number of satisfactory procedures: 4 **Minimum passing score is 75/100.**

Full Mouth (FMX) Patient; Exposure of 18 Film/Images ___**/90 point**. Each error -1 deduction, Retakes -5 deduction (NO more than three retakes).
* Followed infection control guidelines to include PPE's ___**/5 points**. *Followed all student/patient safety guidelines ___**/5 points**. ***Each*** error -1 deduction.

Right Side **Left side**



R= Retake Needed

*Critical steps missed may cause the student to fail

Criteria for errors 1-17

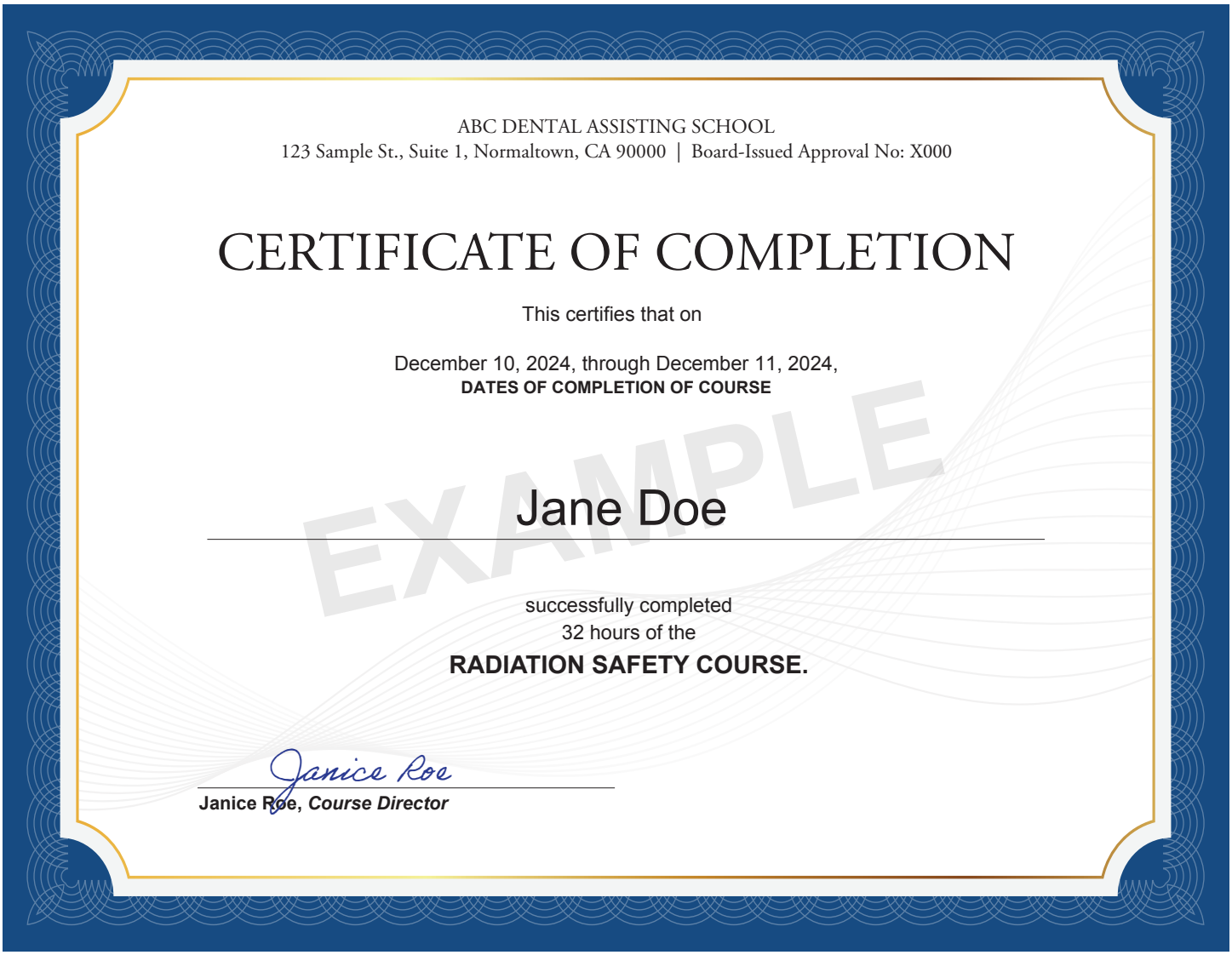
1.Process/ Mounted incorrectly	7. Apices cut off	13. Film/Image Bent
2. Image receptor too far anterior	8. Occlusal/incisal cut off	14. Incorrect holder assembled/used
3. Image receptor too far posterior	9. Foreshortened (too great vertical)	15. Receptor/holder not parallel/teeth
4. Image has cone cut	10. Elongated (insufficient vertical)	16. **OTHER***
5. Overlapped mesial/distal angle	11. Image receptor reversed	17. **Incorrect safety procedures/IC***

E– Excellent: Perfect Image with no technical errors
A—Acceptable meets diagnostic quality, Image with minor technical errors (1-17)
R—Not Acceptable: Retake; Technical errors that are unacceptable for diagnostic quality.

SAMPLE 3: EXAMPLE OF CERTIFICATE OF COMPLETION

(Question 92)

This sample certificate contains all the information required by BPC section 1741(e).



ABC DENTAL ASSISTING SCHOOL
123 Sample St., Suite 1, Normaltown, CA 90000 | Board-Issued Approval No: X000

CERTIFICATE OF COMPLETION

This certifies that on

December 10, 2024, through December 11, 2024,
DATES OF COMPLETION OF COURSE

EXAMPLE

Jane Doe

successfully completed
32 hours of the
RADIATION SAFETY COURSE.

Janice Roe

Janice Roe, *Course Director*