



American Denturist School
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www.americandenturistschool.com

School Catalog

Version 2015R3

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Table of Contents

School Information.....	5
Introduction.....	5
About Us.....	5
Denturist and Denturist-related Education.....	5
General Education Goals.....	6
Administrative Staff and Faculty.....	6
Advisory Board.....	6
Licensing and Accrediting Institutions.....	7
School Facilities.....	7
Technology Requirements.....	8
Equipment and Material Requirements.....	8
School 2018 Calendar.....	9
Admissions and Enrollment Policies.....	10
Application Process.....	10
Work Experience/Prior Related Education (one year program only).....	11
Immunizations.....	11
Medical Screenings.....	12
Background Checks.....	12
Minimum Education Requirement.....	12
English Language Proficiency Test.....	12
Self-Attestation Policy.....	13
Admission Denial / Reapplication Policy.....	13
Application Fees.....	14
<i>Application fee</i>	14
<i>Admission Exam Fee</i>	14
<i>Background Check Fee</i>	14
<i>English Language Proficiency Test Fee - If applicable</i>	14
Enrollment Fees.....	15

<i>Book Fees</i>	15
<i>Registration Fee</i>	15
Other Fees	15
<i>Records/Transcript Request Fee</i>	15
Fee Waiver Policy	15
Denturist Diploma Program	15
Denturist Diploma Program Objective	15
Program Outcomes.....	16
Denturist Diploma Program Timelines	18
Course Listings	18
Program Maps	21
EXTERNSHIP (CLNC 400 - Externship)	25
Denturist Diploma Program Fees	25
List of Fees	25
Financial Assistance	27
General Information	27
Our Commitment to Equal Opportunity / Non-Discrimination.....	27
Discrimination Policy	27
Harassment Policy	27
Accommodation for Disabilities Policy.....	28
Transfer Credit Policy	28
Challenge Tests	29
Cancellation/Withdrawal Policy.....	29
Cancellation and Refund Policies: Distance Learning Instruction (OAR 715045-0037).....	29
Course Cancellation/Termination.....	33
Attendance Policy	33
Leave of Absence / Leave of Absence Reinstatement Policy	34
Grading, Assignment and Test Regulations	34
Grading Policy	34
Assignment, Late Assignment, and Make-Up Policy.....	34
Test and Make-Up Policy	35
Grading System	35

Clock/Credit Hour Policy	35
Student Progress Reports.....	36
Graduation Requirements	37
Termination Date.....	37
Transcript Policy.....	37
Satisfactory Academic Progress (SAP)	37
Student Academic Progress (SAP) Appeals Process.....	38
Student Records	38
Summary of Student Records Security and Storage Protocol	39
Student Standards of Conduct / Code of Conduct.....	39
Student Misconduct.....	39
Academic Integrity	40
Adverse Forms of Academic Integrity.....	40
Discipline policies for misconduct and violations of academic integrity.....	41
Dismissal.....	41
Petitioning for re-entry.....	41
Student Grievance Procedure	41
Student Services	42
Academic Freedom Policy.....	43
Student Obligations.....	44
School Obligations	45
Addendum 1 International Federation of Denturist Baseline Competencies	46
Addendum 2 The Denturist Association of Canada Competencies and Learning Outcomes	52
Addendum 3 United Kingdom General Dental Council Preparing for Practice Learning Outcomes	53
Addendum 4 Oregon Board of Dental Technology Denture Technology Curriculum Objectives	60

School Information

Introduction

Our Mission. The mission of the American Denturist School is to provide an exceptional education with a superior level of academic and technical education through distance modes of delivery, preparing students for immediate success and productivity in the workforce, for continuing formal education, and for lifelong learning.

Our Vision. To be a learning-centered organization that promotes student success. To become a premier school of Denturist education recognized for its leadership in the field of Denturism, and known for excellence in teaching, learning and exceptional career ready graduates.

About Us

The American Denturist School was formed in the spring of 2011 to serve the Denturist profession and the people in need of dental prosthetics throughout the Pacific Northwest. The name of the institution was changed to American Denturist School in 2018 to comply with accreditation standards.

The Denturist profession was born in the United States in 1978 when Oregon voters passed a ballot measure to create the profession. Currently, there are six states in which Denturists are practicing with licenses. According to the National Denturist Association, there are several states that are evaluating the profession, but are looking for an educational institution to deliver fulfillment of the baseline competencies required to practice this profession prior to granting licensure. Denturist practice around the world under a variety of names, including Clinical Dental Technician, and Dental Prosthetist, among others. With an aging population and an aging base of Licensed Denturists in Oregon and Washington, Todd and Brad Young formed the ADS through a rigorous process overseen by the Higher Education Coordinating Commission and the Oregon Health Licensing Agency. The first program started in January of 2013. **Currently the program is licensed and recognized in Oregon, Washington, and Maine.** The ADS is working toward approval of the program in other eligible states and countries throughout the world.

The school is owned and operated by Young Brothers Investments, LLC. Officers are Todd Young, President and Brad Young, Chief Executive Officer.

Denturist and Denturist-related Education

Our education programs are designed to meet the increasing demand for skilled professionals in the Denturist profession. The curriculum is planned primarily to meet the needs of professionals in licensed

states as well as those dental technicians and other dental paraprofessionals that are looking to increase their knowledge in the profession in unregulated states.

General Education Goals

General education is that portion of the School experience that addresses the knowledge, skills, attitudes, and values characteristic of educated persons. It is unbounded by disciplines and honors the connections among bodies of knowledge. ADS degree graduates will demonstrate competency in the following general education areas:

- Think Critically and Creatively
- Write clearly and Concisely
- Assess Precisely
- Communicate Effectively
- Act Ethically

Administrative Staff and Faculty

Director of Education: Todd Young BS, LD, DD

Chief Financial Officer: Brad Young BS

Director of Admissions: Krissie McBride

Director of Information Technology: Dale Canfield

Director of Marketing: Roger Daniels

Educators:

Todd Young BS, LD

Bachelor of Science in Management and Finance, University of Oregon.

Denturist Diploma Coursework for George Brown College's International Denture Education Center. Instructor in all areas of the practice of Denturism.

Shawn Murray LD CDT

Associate's Degree Dental Technology, Bates College. George Brown College's International Denture Education Center. Instructor in all areas of the practice of Denturism, with particular emphasis on laboratory technology.

Advisory Board

The American Denturist School has engaged the following individuals to serve as advisors to give an outside perspective to the administrative in order to ensure that the schools and its program reflect current best practices education in preparing students for real-world practice of Denturism.

Duffy Malherbe DD

Tad Burzinski LD DD

Bill Marais DTG

Chris Bormes BS
Clayton Sulek DD DPD FACD
Eugene Royzengurt DTG
Jim Collis CDT
Joseph Kingston DD PHD
Joseph Vize DD DPD
Melissa Brulotte DD DPD
Arian Deutsch CDT DTG

Licensing and Accrediting Institutions

Higher Education Coordinating Commission (Commission)
775 Court Street NE
Salem, OR 97310
(503) 947-5751 (503) 378-8395 Fax

Oregon Health Licensing Agency
700 Summer Street NE, Suite 320
Salem, OR 97301
(503) 378-8667

Distance Education Accrediting Commission
1101 17th St. NW, Suite 808 Washington, D.C. 20036
Phone: (202) 234-5100
Fax: (202) 332-1386

Accreditation Status

First Accredited: June 22, 2018
Distance Education Accrediting Commission
1101 17th St. NW, Suite 808 Washington, D.C. 20036
Phone: (202) 234-5100
Fax: (202) 332-1386

School Facilities

The American Denturist School main office is located at 145 E. 12th Alley, Eugene OR 97401. The ADS does not maintain a library. Normal hours of operation for the school offices are Monday through Friday, from 9:00 AM to 5:00 PM Pacific Time. Our faculty maintain less routine hours but will follow up with students within 24 hours during the normal work week and are available directly during regularly scheduled Virtual Office Hours. The office is closed on all major holidays.

Technology Requirements

The Denturist Diploma Program offered by the American Denturist School is a distance education program that relies heavily on technology. Our students are required to furnish their own computers in order to access the Learning Management System. There are relatively few opportunities to interact with instructors at the school offices as they are located remotely. It is imperative that you have consistent access to a stable internet connection in order to stay on track and interact not only with faculty, but with fellow students.

The following is a list of required and optional technologies for the ADS:

Required

- A stable Internet Connection, preferably broadband as defined by the FCC.
- A Computer running a modern operating system (Windows, MacOS, Linux) with speakers/headphones.
- A web browser (Chrome, Firefox, Safari, etc) for working in the LMS.
- Software to view PDF files (Adobe Reader) if your web browser cannot.
- A Scanner for scanning in completed scoring sheets for the Externship.
- A Camera for photographing your work and uploading to the LMS.
- Access to Email for detailed communications between the School and Student.

Optional Technologies

- Web Camera and microphone for face to face conversations over the Adobe Connect platform.
- The LMS is usable by Tablets/Mobile Devices. Certain aspects of uploading images become more challenging with a Tablet/Mobile device.

Equipment and Material Requirements

The Denturist Diploma Program provides the following with your paid lab labs fees:

- Sim Head (ADS Rental)
- Stratos Articulator (Sold to Student)
- Models
- Teeth
- Frames, Clips, & Locators

The following equipment and materials will be needed, but not provided:

- Alginate
- Measure for powder and water
- Calipers/other measuring device

- Mixing Bowl
- Mixing spatula/ Alginator
- Impression trays (various sizes- metal or disposable)
- Utility wax
- Stone (Hydrocal or equivalent)
- Boxing wax (optional) or equivalent
- Vibrator
- Model Grinder
- Indelible pencil
- Model knife
- Lab Pans (optional)
- Custom Tray material (either auto (self) cure or light cure)
- Lathe
- Hand piece
- Various Burs (for trimming and drilling)
- Impression gun
- Tray Adhesive
- Polyvinyl siloxane Heavy body (eg Aquasil)
- Polyvinyl siloxane Light Body (eg Aquasil)
- Poly ether (eg Impergum)
- Poly sulfide (eg Coeflex)
- Wax
- Rim former
- Gothic arch tracer (required)
- Torch
- Wax Iron
- Bunsen Burner
- Bite registration material (White wax or PVS monophasic)

This list is NOT all-inclusive and depending on your preference, may require additional armamentarium. You will be reading and watching videos that reference material outside the scope of this list.

School 2018 Calendar

January 2018

January 8 – Start of Winter Term Courses

February 2018

March 2018

March 19 – 23 – Final Reviews/Exams Winter Term

April 2018

April 2 – Start of Spring Term Courses

May 2018

June 2018

June 11 – 15 – Final Reviews/Exam Spring Term

June 25 – Start of Summer Term Courses

July 2018

August 2018

September 2018

September 3 – 7 – Final Reviews/Exam Summer Term

September 17 – Start of Fall Term Courses

October 2018

November 2018

November 26 - 30 – Final Reviews/Exam Fall Term

December 2018

January 2019

January 7 – Start of Winter Term Courses

Admissions and Enrollment Policies

Application Process

1. Submit Admission Application (You must be 18 years of age to apply). Complete an online Admission Application form through www.americandenturistschool.com or download and printout a paper copy. You can also call the American Denturist School office at 541-654-5885 or 800-544-6267 to obtain a paper application.

2. Submit Application/Admission Exam Fee and take Admissions Exam. Submit \$100.00 online or by mail (\$50 application fee, \$50 exam fee) at the time of application. These fees are non-refundable. The exam fee will be applicable each time the test is taken
3. Submit all required Academic Documents.
Email academic documents showing highest degree of academic completion to admissions@americandenturistschool.com or mail to:
American Denturist School
Admissions
145 E. 12th Alley
Eugene OR 97401
4. Take the Admissions Exam – The ADS will email you the link to the online exam after receiving the application and exam fee.
5. Provide English Language Proficiency Test- If Applicable.
6. Provide Immunizations & Screenings – (per policies below).
7. Provide Background Checks – (per the policy below).

Within 5 days after receiving a complete application, satisfactory academic documents, applicable fees, and passing Admission Exam, and applicable language proficiency, the ADS will provide an approval letter with an offer for enrollment. With the approval letter, there will be directions on the enrollment. If denied, the reason for denial will be listed. The applicant can reapply after resolving the reasons for denial.

Work Experience/Prior Related Education (one year program only)

For the one-year program, the candidates must provide proof either through signed employer statement, tax returns, or other approved means of a minimum of two years' work experience or a transcript showing related coursework in dental technology or other dental related coursework. If the candidate does not meet this requirement, they can perform a job shadow in a Denturist office and write a three-page summary of their experience and why they are interested in pursuing a career in this field. This must be submitted to the Director of Education for approval.

Immunizations

The Candidate must provide proof of the following current immunizations (At the Students Expense):

- Hepatitis B (Hep B)
- Measles, Mumps and Rubella (MMR)
- Tetanus, diphtheria, pertussis (Tdap)

- Varicella

Medical Screenings

The Candidate must provide proof of the following Medical Screenings dated no more than 90 days from submission of Admission Documents (At the Students Expense). All screenings need to be performed by a Doctor or Independent Testing Service. Home or self-tests are not acceptable.

- Tuberculosis (TB) (Skin test or IGRA Blood test)
- Substance Abuse- 10-panel drug screen

Background Checks

The Candidate must perform the following Background Checks:

- Social Security Number Trace
- State/National criminal background history
- Sex offender registry check
- OIG LEIE check

The criminal background check is required by the Oregon Health Authority and also serves as an identity verification. The background check will be performed by PreCheck at <http://www.mystudentcheck.com>. The candidate is responsible for the fee for this service. The fee for this service is \$49.95 + any nominal fees charged by third-party verification services and institutions such as courts, previous employers, schools, and licensing agencies and boards. The student is responsible for determining if there are any laws that might prohibit him/her from obtaining a license in the jurisdiction if they are seeking licensure.

Minimum Education Requirement

The American Denturist requires a minimum of High School diploma or transcript, GED, or self-attestation to the equivalent (must be 18 years of age or older). See Self Certification Policy for more details. Candidate should provide transcripts from the highest degree attained. Students with transcripts that are not in English are requested to contact a third part evaluator such as, <http://www.evaluationworld.com/>. The third party evaluation must provide that the transcripts meet the minimum requirements for a high school diploma or GED in the United States. The third party evaluator must send the evaluation directly to the School. The third party evaluator must be approved by the ADS prior to evaluation. The Student is responsible for any fee associated with this evaluation.

English Language Proficiency Test

The Denturist Diploma Program is delivered entirely in English. If your native language is not English or you have not earned a degree from an accredited institution where English is the principal language of instruction an approved English proficiency test will be required and paid for by the candidate. The test must demonstrate college-level proficiency in English through one of the following for admission: Score of 500 on the Test of English as a Foreign Language

(TOEFL PBT), 61 on the Internet Based Test (iBT), 6.0 on the International English Language Test (IELTS), or a 44 on the Pearson Test of English Academic Score Report.

Admission Exam Process:

After paying the admission exam fee, the ADS will email you information on how you can take the online exam. The exam can be taken as many times as you want but will require the Admissions Exam Fee each time. The exam is nationally recognized for predicting how a student will perform on a variety of health profession licensing exams. The ADS uses this third party exam to determine if a student is likely to be able to complete the programs offered by the school. Passing score on the admission Exam for the desired program length:

- Minimum Score of 16 for the 3-year didactic program length.
- Minimum Score of 18 for the two-year didactic program length.
- Minimum Score of 21 for one-year didactic program length (Candidates for this program must complete Proof of Work Experience/Prior Related Education).

Self-Attestation Policy

The American Denturist School is committed to an open admission policy, offering those who have earned a high school diploma, GED, or were homeschooled, an opportunity to enroll in a Diploma/Certificate program. If you do not have an official transcript from your high school or GED program, you must submit a self-certification form during the application process. The ADS reserves the right to request further documentation if it deems necessary. The High School Graduation/GED Certification Form is available upon request. Once admitted, students must provide official documentation prior to the beginning of the second quarter of enrollment to continue in the program.

Admission Denial / Reapplication Policy

There are several reasons that admission to the ADS may be denied, including but not limited to:

Failure to produce a certified High School diploma or transcript, or GED, and Failure to achieve a passing score on the Admission Exam:

(16) on the Admission exam for the 3-year program,

(18) on the exam for the 2-year program,

(21) on the exam for the 1-year program,

Failure to provide proof of current immunizations listed in the catalog,

Failure to provide a background check,

Failure to provide 10 part drug test,

The application fee will be charged each time an application is submitted or resubmitted. The Student applicant must re-submit the appropriate fee, if any, associated with the reason for denial. The student will be notified via email if denial occurs within 5 business days of application with the reason for and remedy to re-apply.

Enrollment Process:

After successfully completing the application process, Students will receive an email with an offer for enrollment in the next available program. Included in the email will be several documents to sign and an invoice for the Registration fees and first tuition payment. You can secure your position in the offered program if you complete all documentation and return it to the ADS with payment within 14 days of receiving the offer. The ADS sets this time limit as there are limited spaces available and wants to make sure that all students can plan ahead and know what program they will attend. The ADS will provide a signed enrollment agreement via email (via mail if requested) within 10 working days of receipt from the Student.

Rolling Enrollment:

Enrollment in the next program date will be offered based on a first-come, first-served basis based on available space. After all spaces are filled, students will be offered enrollment in the next available program. Students can secure their position in the offered program by completing the enrollment process and making the first tuition payment within 14 days after receiving the offer for enrollment.

Application Fees

Application fee

A \$50 fee will be charged and is due at the time of application to the School to process the student's application.

Admission Exam Fee

A \$50 fee will be charged each time an applicant/student takes the exam. There is no limit to the number of times this exam may be taken. The highest score will be recognized and referred to.

Background Check Fee

The student is responsible for the background check fee. Please check with the Director of Admissions to determine what is necessary in the background check as well as for a list of possible services to use.

English Language Proficiency Test Fee - If applicable

The student is responsible for the English Language Proficiency Test fee. A list of approved tests with minimum passing scores is provided in the Admission Criteria section of the School Catalog.

Drug Screen Fee

The student is responsible for the Substance Abuse- 10-panel drug screen.

Enrollment Fees

Payment of fees can be made by Cash, Check, or through our online payment portal. Visa, MasterCard, Discover, or Debit are all option for payment through the online payment portal.

Book Fees

Books are purchased by the students from the book list provided by the ADS. If the students need assistance, please contact the ADS.

Registration Fee

A \$150.00 non-refundable fee will be charged for registration after acceptance to the School and prior to the start of classes. This fee establishes access to all online ancillary material.

Other Fees

Records/Transcript Request Fee

2 certified copies will be provided free of charge at time of Graduation.

A \$25 fee will be charged for each additional certified copies of American Denturist School records or official transcripts requested by students.

Returned Check Fee

A \$25 fee will be charged for returned checks.

Tuition

Tuition fees are charged at \$250 per quarter credit hour and are collected per the fee schedule.

Fee Waiver Policy

Fees may be waived by the school and are not according to any established policy. The American Denturist School reserves the right to waive certain fees on a case-by-case basis and that such waivers are allowed at the discretion of the Director of Education or the Chief Financial Officer.

Denturist Diploma Program

Denturist Diploma Program Objective

Students are trained within the guidelines of the Denturist's scope of practice. This includes: treatment planning, design, fabrication and fitting of complete, partial, immediate and implant-supported and retained dentures. Curriculum topics also include the study of mouth guards, anti-snoring devices, teeth

whitening and implants. The program consists of a challenging curriculum including academic, clinical and “hands-on” laboratory skills. The students will study science, dental sciences, health promotion and Denturist practice management. All areas of study will observe the International Baseline Competencies Profile for Denturist Education, The Denturist Association of Canada Competencies and Learning Outcomes, United Kingdom General Dental Council Preparing for Practice Learning Outcomes, and Oregon Board of Dental Technology Denture Technology Curriculum Objectives. Graduates of this program must successfully complete the written and practical licensing examinations in the jurisdiction where they intend to practice to be eligible to practice as a Denturist in states or countries where the Diploma is recognized. In unregulated states, graduates have increased knowledge and skill in the denture technology field.

Program Outcomes

The following are program outcomes that the student who completes the Denturist Diploma Program achieve competency in as defined by the International Federation of Denturists:

KNOWLEDGE OBJECTIVES
The newly qualified denturist should understand those aspects of the following topics that relate to their framework of professional responsibilities:
1. The engineering and scientific basis of dentistry related to the provision of removable dental prosthetic devices, including the mechanisms of knowledge acquisition, applied medical devices methodology and the evaluation of evidence;
2. Common oral problems treated by removable dental prosthetic devices; the techniques for their diagnosis, treatment planning and treatment; and the maintenance of stable treatment results;
3. Problems presented by patients that are either directly related to the wearing of removable dental prostheses or could affect the wearing of them;
4. The scope and perspective of contemporary removable prosthetic dentistry and its clinical, mechanical and biological basis;
5. Behavioral science and communication;
6. Principles of health promotion and disease prevention;
7. Organization and provision of health care in the community and in hospital;
8. The relevance of business and management skills;

9. The broader issues of professional practice, including ethics, medico-legal considerations, health and safety legislation and the maintenance of a safe working environment;

10. Ways in which medical emergencies and physical and mental illness may affect patients and the psychological response to normal physical and social processes.

SKILL OBJECTIVES

The newly qualified denturist should be able to:

11. Demonstrate a wide range of transferable skills, including investigative, analytical, problem solving, planning, communication, presentation and team skills.

12. Communicate effectively with patients, their families and associates, members of the dental team and other health professionals involved in patient care, and with the public.

13. Obtain and record a relevant history, interpret a care plan or prescription, and carry out an appropriate examination of the patient as part of the necessary procedures leading to the provision of removable dental prosthetic devices.

14. Detect the presence of diseases of the oral and related structures, including abnormalities that may require further investigation and, if appropriate, make arrangements for the referral of affected patients.

15. Evaluate and apply evidence-based treatment and techniques relating to the provision of removable dental prosthetic devices.

16. Devise and record a comprehensive contract review, perform appropriate visual and tactile assessments, interpret the findings obtained from information available and make provision for further assessment and review.

17. Interpret and interact with a developed treatment plan for a removable dental prosthetic device and monitor treatment progress, identify problems arising during a course of treatment and propose further treatment options, including preventative and adjunctive treatment.

18. Undertake, to the highest possible standards, those clinical and dental technology procedures that are within his or her required area of competence, including techniques for prevention of future problems and the ability to enhance the oral health care of individuals.

Denturist Diploma Program Timelines

The Denturist Diploma Program can be taken over one, two, or three years, depending on the minimum admissions score and your experience in the dental technology field. Students must complete the program within 150% of the program length, not to exceed 4.5 years. The externship must be completed within 1 year of acceptance of your Externship Documents and enrollment into the externship, normally at the completion of the didactic portion of the program.

The Denturist Diploma Program is comprised of 122 quarter credit hours (3660 clock hours) of distance education and 16 quarter credit hours (400 clock hours) of externship. The program is designed to take one, two or three years to complete.

If an ADS course is discontinued, the ADS guarantees that all students enrolled in the course will be allowed to complete their instruction.

Course Listings

ANAT 101- General Anatomy & Physiology 4 Quarter Credit Hours

The student will survey anatomical terminology, basic chemistry, cell structure and function, tissues, and the following systems: integumentary, skeletal, muscular, and nervous.

MBIC 201- Microbiology & Infection Control 4 Quarter Credit Hours

The student will study concepts in bacterial identification, morphology, metabolism and genetics; bacterial, viral, and parasitic relationships with human health and disease; and basic immunology. Introduction to the chain of infection, infectious and plaque associated diseases affecting the dental office environment and protection of the health care worker. Topics include blood borne pathogens, federal regulations, dental office clinical asepsis protocol, management of waste, office safety programs, and chemical and emergency plans.

OANA 301- Orofacial Anatomy & Biomechanics 4 Quarter Credit Hours

The student will identify, describe, and locate the bones of the skull, muscles, cranial nerves, blood vessels, and lymphatics of the head and neck; glands of the oral cavity; the tongue, the temporomandibular joint; and the alveolar processes. The student will also be able to explain and recognize terms and processes related to the development of the head, face and oral cavity.

GHST 301- General Histology, Dental Histology & Embryology 4 Quarter Credit Hours

The student will identify and describe various cell types in standard histologic sections and to identify a variety of normal tissue. The study of dental histology and morphology of the teeth and surrounding soft tissues.

PERI 340- Periodontology 3 Quarter Credit Hours

The student will study of the normal periodontium, periodontal pathology, etiology and principles of periodontal disease, examination procedures, and principles of periodontal therapy, non-surgical

periodontal therapy and prevention modalities. American Academy of Periodontology classifications of periodontal disease, maintenance considerations.

ANAT 102- General Anatomy & Physiology 4 Quarter Credit Hours

The student will survey the endocrine, lymphatic, cardiovascular, digestive, respiratory, reproductive, urinary, and some cover- age of human development, human genetics, and immunology.

OPAM 310- Oral Pathology & Medicine 3 Quarter Credit Hours

The student will study concepts in general, systemic, and oral pathology. Emphasis on entities frequently encountered, clinical signs and symptoms, and concepts of differential diagnosis.

DMAT 220- Dental Materials 5 Quarter Credit Hours

The student will study biomechanical principle, properties, and manipulation of dental materials: armamentarium for various dental materials. Correlates restorative, biological and materials sciences.

RADP 210- Radiographic Pattern Recognition 3 Quarter Credit Hours

The student will be introduced to radiographic essentials. Emphasis on safety precautions, paralleling technique, and processing of exposed film. History and development of radiography, biological effects of exposure, extraoral techniques, and interpretation of processed film.

SOCI 114- Sociology 3 Quarter Credit Hours

The student will learn the development and application of sociological concepts and perspectives concerning human groups; includes attention to socialization, cultures, organization, stratification and societies.

DPSY 230- Dental Psychology & the Aging Process (Gerontology) 3 Quarter Credit Hours The student will study dental management issues of aging adults and persons with medically compromised conditions and disabilities.

PHRM 310- Pharmacology 4 Quarter Credit Hours

The student will be introduced to various drugs used in the practice of dentistry; an intro to the most commonly prescribed drugs that students might encounter on a patient's medical history; nomenclature, classification, dosage, contraindications, and effects of pharmacological compounds.

PHLR 170- Public Health, Legislation, & Research 3 Quarter Credit Hours

The student will be introduced to dental public health practices. Emphasis on use of an evidence based philosophy for incorporating scientific literature into community dental health practices. Instruction in basic research, statistical concepts and electronic databases

PDNT 401- Pre-clinical Prosthetics: Clinical & Lab 9 Quarter Credit Hours

The student will be introduced to disciplines of removable complete and partial dentures and implants, including classification and progress of edentulism, support sources and principles, design, fabrication and evaluation.

NUTR 190-Nutrition 4 Quarter Credit Hours

The student will be introduced to the science of nutrition and its oral relevance. Emphasis will be on preventive dentistry and counseling for dental disease prevention.

CDNT 410- Clinical Prosthetics: Clinical & Lab 8 Quarter Credit Hours

The student will study the diagnosis, treatment planning, and care of edentulous patients, including immediate or transitional dentures.

COMM 114- Speech and Communication 3 Quarter Credit Hours

The student will be introduced to the field of communication, with emphasis on the history of communication study, theories important to all areas of communication and speech, the contexts in which communication occurs, and the issues that must be faced.

ECOM 108- English Composition 3 Quarter Credit Hours

The student will learn how to apply critical reading, writing, and analysis of texts with particular attention to research methods and writing.

CDNT 411- Clinical Prosthetics: Clinical & Lab 8 Quarter Credit Hours

The student will study the diagnosis, treatment planning, and care of complex edentulous patients, including troubleshooting.

MEDE 150 – Medical Emergency Care 3 Quarter Credit Hours

The student will learn about various medical emergencies and how to react to these situations. Students will be required to take a CPR Certification near their home town or will be required to travel to Eugene, OR to take a specific CPR class.

DPSY 220- Dental Psychology 3 Quarter Credit Hours

The student will define, describe, and identify theories, functions, patient expectations, communication and behavior modification related to the dental field.

RDNT 420- Removable Partial Dentures: Clinical & Lab 12 Quarter Credit Hours

The student will study removable partial denture design, fabrication, and function; basic principles, diagnosis and treatment planning; clinical application.

ELPR 168- Ethics, Legal & Professional Relationships 3 Quarter Credit Hours

The student will explore of current trends and issues in the profession, ethics and jurisprudence, practice management and researching employments opportunities.

IDNT 430- Dentures over Implants 12 Quarter Credit Hours

The student will study types of implants and abutment systems; full and partial, immediate and staged loading of prosthetics; diagnosis, treatment planning, and clinical techniques.

MNGT 160- Small Business Management 3 Quarter Credit Hours

The student will be introduced to the entrepreneurial concepts of business management, including planning, raising capital, using business information, managing employees, and marketing products and services.

PMAN 161- Practice Management 3 Quarter Credit Hours

The student will be introduced to an overview of the dental office. Topics include styles of management, office management software, office accounting, and business office equipment. Interpersonal communications, both written and oral, are emphasized.

CLNC 400- Externship 16 Quarter Credit Hours

The student will perform a variety of clinical procedures that will prepare them to practice in real world situations.

Program Maps

1 Year Program Map - 1 Year didactic program (plus CLNC 400 EXTERNSHIP)

TERM 1

ANAT 101 - General Anatomy & Physiology
MBIC 201 - Microbiology & Infection Control
OANA 301 - Orofacial Anatomy & Biomechanics
GHST 301 - General Histology, Dental Histology & Embryology
OPAM 310 - Oral Pathology & Medicine
PDNT 401 - Pre-clinical Prosthetics: Clinical & Lab
ECOM 108 - English Composition

TERM 2

PERI 340 - Periodontology
ANAT 102 - General Anatomy & Physiology
DMAT 220 - Dental Materials
PHRM 310 - Pharmacology
CDNT 410 - Clinical Prosthetics: Clinical & Lab
COMM 114 - Speech & Communication
DPSY 220 - Dental Psychology

TERM 3

RADP 210 - Radiographic Pattern Recognition
SOC1 114 - Sociology
DPSY 230 - Dental Psychology & the Aging Process
CDNT 411 - Clinical Prosthetics: Clinical & Lab
MEDE 150 - Medical Emergencies
ELPR 168 - Ethics, Legal & Professional Relationships
MNGT 160 - Small Business Management
PMAN 161 - Practice Management

TERM 4

PHLR 170 - Public Health, Legislation, & Research
NUTR 190 - Nutrition
RDNT 420 - Removable Partial Dentures: Clinical & Lab
IDNT 430 - Dentures over Implants

EXTERNSHIP

CLNC 400 - Externship

2 Year Program Map - 2 year didactic program (plus CLNC 400 EXTERNSHIP)

TERM 1

ANAT 101 - General Anatomy & Physiology
MBIC 201 - Microbiology & Infection Control
OANA 301 - Orofacial Anatomy & Biomechanics
GHST 301 - General Histology, Dental Histology & Embryology

TERM 2

PERI 340 - Periodontology
ANAT 102 - General Anatomy & Physiology
OPAM 310 - Oral Pathology & Medicine
DMAT 220 - Dental Materials

TERM 3

RADP 210 - Radiographic Pattern Recognition
SOC1 114 - Sociology
DPSY 230 - Dental Psychology & the Aging Process
PHRM 310 - Pharmacology

TERM 4

PHLR 170 - Public Health, Legislation, & Research

PDNT 401 - Pre-clinical Prosthetics: Clinical & Lab
NUTR 190 - Nutrition

TERM 5

CDNT 410 - Clinical Prosthetics: Clinical & Lab
COMM 114 - Speech & Communication
ECOM 108 - English Composition

TERM 6

CDNT 411 - Clinical Prosthetics: Clinical & Lab
MEDE 150 - Medical Emergencies
DPSY 220 - Dental Psychology

TERM 7

RDNT 420 - Removable Partial Dentures: Clinical & Lab
ELPR 168 - Ethics, Legal & Professional Relationships

TERM 8

IDNT 430 - Dentures over Implants
MNGT 160 - Small Business Management
PMAN 161 - Practice Management

EXTERNSHIP

CLNC 400 - Externship

3 Year Program Map - 3 year didactic program (plus CLNC 400 EXTERNSHIP)

TERM 1

ANAT 101 - General Anatomy & Physiology
OANA 301 - Orofacial Anatomy & Biomechanics
GHST 301 - General Histology, Dental Histology & Embryology
SOCI 114 - Sociology

TERM 2

MBIC 201 - Microbiology & Infection Control
OPAM 310 - Oral Pathology & Medicine ANAT 102 -
General Anatomy & Physiology

TERM 3

GHST 301 - General Histology, Dental Histology & Embryology

PHRM 310 - Pharmacology

MEDE 150 - Medical Emergencies

TERM 4

PERI 340 - Periodontology

DPSY 230 - Dental Psychology & the Aging Process

NUTR 190 - Nutrition

TERM 5

DMAT 220 - Dental Materials

RADP 210 - Radiographic Pattern Recognition

COMM 114 - Speech & Communication

TERM 6

DPSY 220 - Dental Psychology

MNGT 160 - Small Business Management

PHLR 170 - Public Health, Legislation, & Research

TERM 7

ECOM 108 - English Composition

ELPR 168 - Ethics, Legal & Professional Relationships

PMAN 161 - Practice Management

TERM 8

PDNT 401 - Pre-clinical Prosthetics: Clinical & Lab

TERM 9

CDNT 410 - Clinical Prosthetics: Clinical & Lab

TERM 10

CDNT 411 - Clinical Prosthetics: Clinical & Lab

TERM 11

RDNT 420 - Removable Partial Dentures: Clinical & Lab

TERM 12

IDNT 430 - Dentures over Implants

EXTERNSHIP

CLNC 400 - Externship

EXTERNSHIP (CLNC 400 - Externship)

The student is responsible for finding their own Externship Supervisor and location. The student must submit the proposed Externship Supervisor application to the ADS for approval prior to beginning the Externship.

Externship Timing

The Externship can start as early as Term 3 (one year program), Term 7 (two year program), and Term 9 (three year program). The Externship must be completed within 1 year of externship enrollment.

Externship Supervisor Application

The Externship Supervisor Application will be provided upon request but no earlier than the start of term 2 in the one-year program, term 5 in the two- year program, and term 6 in the three-year program, and will contain at a minimum the following requirements:

- Provide Name, Home Address, Business, Address, Telephone Numbers (Home/Office/Cell), Email Address
- Provide proof of a valid license in an approved state they are practicing for at least three years
- Operate an onsite laboratory and clinic where the direct training and supervision will occur.
- Will not supervise more than two students at one time. (Special exceptions made in writing by Director of Education on a case by case basis)
- Will adhere to the evaluation process and criteria set by the ADS.

Please see the Externship Supervisor Application for complete details.

Externship Process

The externship will follow specific requirements provided by the ADS for the instruction and evaluation of students relative to patient evaluation, treatment planning, design, fabrication, delivery and follow-up of patients.

Denturist Diploma Program Fees

List of Fees

The following is a list of the fees associated with the Denturist Diploma Program. These fees do not include any expenses associated with travel, meals and lodging to complete the Externship.

Description	Amount	Date Due
Application Fee	\$50.00	At Application
Admission Exam Fee (per time)	\$50.00	At Application
Background Check Fee	Student responsible	At Application
English Language Proficiency Test Fee - If applicable	Student responsible	At Application
Registration Fee	\$150.00	At Enrollment
Tuition:	\$34,500.00	Prior to start of Term 1
Lab Supplies:	\$3,975.00*	
Tuition & Lab Supplies Payment Schedule:***		
Payment 1	\$4,810.00	At Enrollment
Payment 2	\$4,810.00	Prior to Start of Term 2
Payment 3	\$4,810.00	Prior to Start of Term 3
Payment 4	\$4,810.00	Prior to Start of Term 4
Payment 5	\$4,810.00	Prior to Start of Term 5
Payment 6	\$4,810.00	Prior to Start of Term 6
Payment 7	\$4,810.00	Prior to Start of Term 7
Payment 8	\$4,805.00	Prior to Start of Term 8
Estimated fees for non-provided supplies	\$3000.00	
Books:		
Year 1	By Student	Prior to Classes
Year 2	By Student	Prior to Classes
Estimated Book Cost	\$510-\$2140	

* If the student fails to make their lab supplies payment on time, they may be charged for expedited shipping. The actual cost of the shipping with a 10% handling fee will be assessed to the student. International students will be charged for all shipping, customs, & tariff costs. *** Other payment plans are available. Please contact Director of Admissions for options.

All tuition and fees are due on the dates prescribed above. If fees are not received by those dates, the student will not be allowed to begin the next term's courses unless all outstanding fees are paid or arrangements are made prior to the start of the courses with Admissions. Failure to pay tuition and/or fees within one week of the beginning of the term will result in termination.

**** All books must be purchased by the Student. If the student needs assistance, please contact the ADS. ****

Financial Assistance

The ADS has several internal financing plans. All financing plans are compliant with state and federal law, including Truth in Lending rules. Please contact the Director of Admission for your options.

General Information

Our Commitment to Equal Opportunity / Non-Discrimination

Discrimination Policy

The student policies, including admission, of the American Denturist School are directed toward securing and maintaining a student body of competent people without regard to race, religion, color, national origin, sex, age, sexual orientation, marital status, mental or physical challenge (when these do not interfere with successful performance) or other protected classes under applicable local, state and federal law. In addition, any person unlawfully discriminated against, as described in ORS 345.240, may file a complaint under ORS 659A.820 with the Commissioner of the Bureau of Labor and Industries. Violators will be subject to appropriate disciplinary action. The school's policies governing employees will be enforced in situations where instructional staff or other school personnel have been found to have engaged in discriminatory behavior.

Harassment Policy

It is the Schools policy that all students have a right to learn in an environment where the dignity of each individual is respected. For that reason, we expect all students to accomplish their work in a business-like manner with concern for the well-being of the entire school. Any harassment of students by fellow students or employees is not permitted, regardless of their working relationship or supervisory status. Specifically forbidden is harassment of a sexual, racial, ethnic or religious nature. This includes unwelcome sexual advances, innuendoes and other verbal or physical conduct of a sexual nature that has the purpose or effect of creating an offensive environment. It also includes verbal and physical conduct of a racial, religious or ethnic nature that creates an offensive environment.

Students subjected to any type of harassment, particularly of a sexual, racial, ethnic or religious nature by an employee or student should promptly contact a member of the administrative front office staff listed in the School Catalog. We encourage students to report complaints to us to informally resolve problems involving harassment. Our ability to resolve these kinds of problems is dependent on your cooperation in reporting incidents that create an offensive or hostile environment for you. In the event a complaint is reported, an investigation will be undertaken immediately. Violators will be subject to appropriate disciplinary action.

Accommodation for Disabilities Policy

It is the policy of American Denturist School (ADS) to provide reasonable accommodation for persons defined as disabled under Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, and all other local and state requirements dealing with students who have recognized disabilities.

A request for reasonable accommodation will be granted provided that the following criteria are met:

- The request for reasonable accommodation is based on individual needs.
- The request does not require a financial burden on the American Denturist School that is beyond what is viewed as customary and reasonable.
- The request does not compromise the basic requirements of the course.

ADS online students who would like to request academic accommodations for a disability will need to contact the learning disabilities specialist and provide appropriate documentation of their disability at least one month prior their first class meeting:

Krissie McBride, Director of Admissions
E-mail: krissie@americandenturistschool.com
Office Phone: 541-654-5885
Fax: 800-544-6267

Appropriate documentation will include the Initial Online Academic Accommodation Request (available in on the website), a diagnosis of the disability, testing results and the impact of the disability on the student in the online learning environment. The school is required by law to have current documentation of the disability in order to provide accommodations. Typically, academic testing results are required to be within the last three years. (The time frame of testing for certain disabilities can be more or less frequent based on the area of disability and the possibility of a change in the disability or condition pertaining to student need and the requirements of our office.)

Insufficient or incomplete documentation can result in a delay in the accommodations or the implementation of limited or temporary accommodations until appropriate and up-to date documentation is received in our office.

Transfer Credit Policy

The acceptance of transfer academic credits to another institution is determined by the receiving institution. Institutions individually establish criteria for transfer credit acceptance based on many factors, including but not limited to course content, degree or non-degree course, final grade, credits per course, type of accreditation, age of credits, etc. Courses in ADS diploma program may or may not transfer to other institutions and depends solely on the receiving institution's criteria and determination. The ADS does not

imply or guarantee the transferability of credits from its diploma program. Due to the all-inclusive, unique nature of ADS Denturist diploma program, the ADS does not accept transfer credit.

Challenge Tests

Students who feel they meet or exceed the academic requirements for specific courses, either through prior coursework or on the job education, may choose to challenge some individual courses at the American Denturist School. A Challenge Test will be available for all courses except:

PDNT 401 Pre-clinical Prosthetics: Clinical & Lab: 9 units
CDNT 410 Clinical Prosthetics: Clinical & Lab: 8 units
CDNT 411 Clinical Prosthetics: Clinical & Lab: 8 units
RDNT 420 Removable Partial Dentures: Clinical & Lab: 12 units
IDNT 430 Dentures over Implants: 12 units
CLNC 400 Externship: 16 units

A successful score to pass a Challenge Test is 70% or better. If a passing score is attained, the student will receive credit for the course in the form of a pass or no pass. Students may only take a Challenge Test for a course one time. If the student does not pass the challenge exam with a score of 70% or higher on the first attempt, the student will be required to take the course as it is designed. There are no additional fees associated with taking Challenge Test. No more than 25% of the program (by number of quarter credit hours) may be completed via Challenge test. There will be a 25% reduction in tuition for passing the Challenge Test in the courses that are passed, based on \$250 per quarter credit hour. All policies regarding tests and quizzes apply to Challenge Tests as well.

Cancellation/Withdrawal Policy

After starting classes, a student may withdraw from a program or course at any time. Withdrawal slips are available upon request from the Director of Admissions. Refunds, if any, are based on the number of program hours and are calculated based on the student's assignment or tests completed and issued within 40 calendar days. The Refund Policy (OAR 581-045-0037) listed below and all other relevant refund policies as listed in the School Catalog apply.

Cancellation and Refund Policies: Distance Learning Instruction (OAR 715045-0037)

- (1) A student may cancel enrollment by giving written notice to the school. Unless the school has discontinued the program of instruction, the student is financially obligated to the school according to the following:
 - (a) If cancellation occurs within 5 business days of the date of enrollment and lesson materials have not been delivered, all monies related to the enrollment agreement shall be refunded;
 - (b) If cancellation occurs within 5 business days of the date of enrollment and lesson materials have been delivered, all monies related to the enrollment agreement shall be

refunded with the exception of the cost of unreturned lesson materials or the cost of replacement for returned materials that are damaged or marked;

(c) If cancellation occurs after five business days of the date of enrollment and the lesson materials have been shipped but not delivered to the student: (A) The school may charge an amount equal to 15 percent of the tuition cost, or \$150, whichever is less; that being established as its registration fee;

(B) If the student returns the unopened books and supplies to the school within five days of receipt, the school will refund the total cost of lesson materials.

(d) If cancellation occurs after five business days of the date of enrollment and the lesson materials have been delivered to the student but not returned within five days of receipt, and before the completion of the first lesson assignment, the school may charge:

(A) An amount equal to 15 percent of the tuition cost, or \$150, whichever is less; that being established as its registration fee; and (B) The total cost of books and supplies.

(e) If withdrawal or termination occurs after the completion of the first lesson assignment and before 50 percent of the total lesson assignments are completed, the student shall be entitled to a pro rata refund of the tuition when the amount paid for the instructional program exceeds the charges owed to the school. In addition to the pro-rated tuition charge, the school may retain the registration fee, book and supply fees, and any other legitimate charges owed by the student;

(f) If withdrawal or termination occurs after completion of 50 percent or more of the total lesson assignments, the student shall be obligated for the tuition charged for the entire instructional program and shall not be entitled to any refund;

(2) For cancellation under subsections (1)(a)–(c), the "date of enrollment" will be determined:

(a) When enrollment occurs by a document exchange through a mail delivery service, the enrollment date shall be the date the enrollment agreement is signed by both the student and the authorized school official, whichever is later;

(b) When the enrollment occurs online, the date of enrollment will be the date the school receives:

(A) A copy of the enrollment agreement signed by the student and the student is granted access to the program; or

(B) Submission of student enrollment information through a secured website. The website must have a registration process that includes, but is not limited to, statements detailing the legal and financial obligations related to enrollment in a school. The student must verify that he/she has read and understands the enrollment agreement. A copy of the student enrollment agreement information that includes

"a declaration by the student acknowledging the reading, understanding and acceptance of the enrollment obligations" shall be placed in the student file in lieu of a signed enrollment agreement.

- (3) When a program is measured in lesson assignments, the portion of tuition cost for which the student will be charged is determined by dividing the number of lesson assignments completed by the total number of lesson assignments for the program.
- (4) A program that includes both distance learning and resident instruction must state separately on the enrollment agreement the costs for the distance-learning portion of the program and the costs for the resident portion. The appropriate refund policies for distance learning and resident instruction will apply for each portion of the program.
- (5) Resident instruction dates must be scheduled by the time the student completes 50 percent of the distance-learning portion of the program.
 - (a) For the resident portion, charges can be assessed only after a student attends the first resident class session;
 - (b) Maximum charges shall be calculated by applying the pro rata refund requirements established under OAR 715-045-0036(1)(a) through (e); and (c) In the event that a school denies a student entrance in the residence portion of the program because of scheduling delays exceeding 30 days between completion of the distance learning portion and commencement of the residence portion, or other changes in contract conditions, all tuition paid for both the distance learning and scheduled residence portions must be refunded.
- (6) "Withdrawal or Termination" is acknowledged to have occurred when:
 - (a) Written notice of same is provided to the school by the student; or
 - (b) The student has failed to submit completed lesson assignments and/or to otherwise maintain the school's published standards of satisfactory progress; or
 - (c) In the instance of a resident portion of a program, the student has failed to attend classes and/or to otherwise maintain the school's published standards for satisfactory progress.
- (7) The term "tuition cost" means the charges for instruction including any lab fees. Tuition cost does not include application fees, registration fees, or other identified program fees and costs. The school shall adopt and publish policies regarding the return of resalable books and supplies and/or the prorating of user fees, other than lab fees.
- (8) The term "Pro rata refund" means a refund of tuition paid for that portion of the program not completed by the student.
- (9) The school shall not charge a withdrawal fee of more than \$25.
- (10) The school may adopt and apply refund calculations more favorable to the student than those described under this policy.
- (11) When a cancellation, withdrawal, termination, or completion occurs, a calculation of all allowable charges under this rule shall be made. If such calculations evidence that the school received total payments greater than its allowable charges:
 - (a) Within 40 days after notification of such cancellation, withdrawal, termination, or completion, a written statement showing allowable charges and total payments received shall be delivered to the student by the school, together with a refund equal in amount to monies paid to the school in excess of those allowable charges;

(b) In the event payments to a student account are derived from federal and/or state tuition assistance program(s), a sponsoring public agency, private agency, or any source other than the student, the statement of charges and payments received together with an appropriate refund described under section (11) (a) of this rule may be delivered instead to such party(ies) in interest, but only with respect to the covered portions thereof.

(12) In case of disabling illness or accident, death in the immediate family, or other circumstances beyond the control of the student that causes the student to leave school, the school shall arrange a prorated tuition settlement that is reasonable and fair to both parties.

(13) A school shall be considered in default of the enrollment agreement when a functioning course or program is discontinued or canceled or the school closes prior to completion of contracted services. When a school is in default, student tuition may be refunded by the school on a pro rata basis. The pro rata refund shall be allowed only if the Superintendent determines that the school has made provision for students enrolled at the time of default to complete a comparable program at another institution. The provision for program completion shall be at no additional cost to the student in excess of the original contract with the defaulting school. If the school does not make such provision, a refund of all tuition and fees shall be made by the school to the students.

Stat. Auth.: ORS 345.115

Stats. Implemented: ORS 345.115

Hist.: 1EB 31-1986, f. & ef. 7-23-86; EB 11-1990, f. & cert. ef. 2-1-90; EB 41-1990, f. & cert. ef. 7-10-90; EB 13-1996, f. & cert. ef. 7-26-96; ODE 32-2000, f. 12-11-00 cert. ef. 1-1-01; Renumbered from 581-045-0027, ODE 15-2006, f. 12-11-

Sample Refund Calculation:

The ADS follows the Oregon Administrative Rule (ORS) 715-045-0037 Cancellation and Refund Policies: Distance Learning Instruction. This rule spells out how and when cancellation and refunds take place but does not clearly define how the completion of the courses is determined in order to calculate percent complete or pro rata tuition. The ADS employs the flexible time schedule method of determining the completion and identifying benchmarks used in calculation of Refunds. The following table should be used as a tool to help guide one's analysis in determining completion rates and refunds anticipated (Note: Refunds are calculated on a per course basis):

Description: Benchmarks	Percentage Completed by the Student	Percentage of Tuition Returned to the Student Minus the Application and/or Registration Fee	Percentage of Tuition Retained by the Institution
Week 1 Exam	9%	91%	9%
Week 2 Exam	18%	82%	18%

Week 3 Exam	27%	73%	27%
Week 4 Exam	36%	64%	36%
Week 5 Exam	45%	55%	45%
Week 6 Exam	55%	50%	55%
Week 7 Exam	64%	0%	100%
Week 8 Exam	73%	0%	100%
Week 9 Exam	82%	0%	100%
Week 10 Exam	91%	0%	100%
Week 11 Exam	100%	0%	100%

Course Cancellation/Termination

The American Denturist School reserves the right to cancel and reschedule any course that does not meet the minimum enrollment of three students. All students enrolled in a course that has been rescheduled will be notified of the new start date for that course. Students who do not wish to continue in their programs due to a cancellation must give written notice to the school within five business days and may request a full refund. Refunds will be calculated based on the student's last date of attendance and refunds (if any) will be issued within 40 calendar days of the date of course cancellation.

Attendance Policy

The goal of the American Denturist School is to prepare students for the workplace by providing specific course work for specific skills and by encouraging good work habits including appropriate time spent on the job. Due to the online nature of the program, the student is allowed to progress at their own pace. However, course instructors have laid out the required assignments and curricula over the course of the eleven-week term in a manner that allows for an even workload. In order to ensure that students are made aware of progress throughout the course, four and eight-week progress reports are sent out that gauge the students' progress against the recommended pace. If a student falls behind this pace, and instructor will contact them via email or phone call to determine if there are any other necessary steps to take to ensure completion of the course.

The American Denturist School believes that students must attend class in order to attain the course learning outcomes. The expectation for students in online courses is no different in this regard than for traditional courses. Though with a different delivery mode and different definition of participation, the same class attendance/course participation expectations hold for online courses. Our online courses will, at a minimum, have weekly requirements for student participation which can be documented by any or all of the following methods: student tracking in our Learning Management System; submission/completion of assignments; and/or signed attestation of completed assignments. The school's Learning Management System sends out a progress report to the student at the four and eight-

week mark. Based on assignment completion and test scores, the student is advised as to whether they are making satisfactory progress and how to improve if they are not. The instructor receives the same notices and follows up appropriately. Students who fail to maintain active participation in an online course as defined in the course syllabus will be required to retake the course, including paying prorated tuition based on the number of course hours in that quarter.

Leave of Absence / Leave of Absence Reinstatement Policy

A leave of absence is granted in situations in which a student may find it impossible to continue in regularly scheduled courses without interruption. Examples of this include but are not limited to, family death, medical emergencies, etc. To request a leave of absence, you must do so in writing to the Director of Education. Leaves of absence are good for up to one year. Approval of a leave of absence is contingent upon specific circumstances, to be approved by the Director of Education. Being that the ADS uses a progressive curriculum, a student on a leave of absence may not be allowed back until the following year. If the student does not return to school the following year he/she must reapply for admission. The School's published cancellation policy applies to students who wish to leave mid-term.

Grading, Assignment and Test Regulations

Grading Policy

All students are required to have a minimum passing grade of 70% for each course completed. Grading policies will be clearly detailed in the information provided by the Syllabus prior to first day of classes. Students who do not meet the minimum passing grade of 70% upon completion of a particular course will have the opportunity to retake the course the very next term that it is offered and available (full course tuition will be charged to retake the course at \$250 per quarter credit hour). The grade for the failed course will be entered on the student's transcript and will be calculated with the overall grade point average, omitting the previous grade. When the failed course is a prerequisite for a more advanced course, the student will not be enrolled in the advanced course before successful completion of the prerequisite course.

Assignment, Late Assignment, and Make-Up Policy

All assignments must be completed by the end of the term unless the course syllabus states otherwise. If a student is unable to complete an assignment when due, the student must provide documentation to show that an unusual or extenuating/emergency circumstance (examples including but not limited to: Family death, medical emergencies, etc.) prevented the student from handing in the assignment as directed. Documentation must be provided, and permission must be obtained from an administrative staff member before the instructor may accept the assignment. The student may make arrangements to provide the assignment(s) within 5 business days, to the instructor when the absence is known in advance.

This may seriously affect the overall grade point average of the course. Students are encouraged to complete all homework, handouts, and other assignments on time, and turn them in as directed by the instructor for each course to avoid a no grade on their assignments.

Test and Make-Up Policy

All quizzes, midterms and final must be taken by the end of the term. The only exception shall be if the student presents documentation to show unusual or extenuating emergency circumstances to the Director of Education, and the Director of Education finds that such unusual or extenuating circumstance existed, and gives authorization for a test to be made up. It is the student's responsibility to contact the instructor within two class days of confirmation of the extenuating circumstances to make arrangements to make up the test or exam. Failure to do so will result in a 0 (Zero) grade for that test.

Grading System

The American Denturist School uses the following grading system:

Percentage	Grade	Points
90-100%	A	4.0
80-89%	B	3.0
70-79%	C	2.0
60-69%	D	1.0
0-59%	F	0.0

The student's grade point average (GPA) is computed by dividing grade points earned by the number of quarter credit hours attempted.

Clock/Credit Hour Policy

Each course is assigned quarter credit hours. The American Denturist School has adopted the Federal Definition of the Quarter Credit Hour. For purposes of the application of this policy and in accord with federal regulations, a quarter credit hour is an amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutionally established equivalency that reasonably approximates:

Not less than one hour of classroom or direct faculty instruction and a minimum of two hours out of class student work each week for ten to twelve weeks for one quarter hour of credit, or at least an equivalent amount of work for other academic activities as established by the institution including laboratory work, internships, practica, studio work, and other academic work leading to the award of quarter credit hours. Each quarter credit hour awarded is equivalent to 30 hours of student work.

This quarter credit hour policy applies to all courses at all levels that award academic credit (i.e. any course that appears on an official transcript issued by American Denturist School) regardless of the mode of delivery including, but not limited to, self-paced, online, hybrid, lecture, seminar, and

laboratory. Faculty responsible for ensuring that credit hours are awarded only for work that meets the requirements outlined in this policy.

The expectation of contact time inside the classroom and student effort outside the classroom is the same in all formats of a course whether it be fully online, a hybrid of face-to-face contact with some content delivered by electronic means, or one delivered in lecture or seminar format. Courses that have less structured classroom schedules, such as research seminars, independent studies, internships, practica, studio work, or any other academic work leading to the award of quarter credit hours, at a minimum, should state clearly learning objectives and expected outcomes and workload expectations that meet the standards set forth above.

Student Progress Reports

The student is responsible for their own learning process and will need to make improvements in areas in which they are deficient. In order to achieve this, they need to have regular, consistent feedback about their performance. The American Denturist School provides immediate feedback via the Learning Management System (LMS).

The students' performance in each course and in the overall program will be monitored via the LMS, online. The LMS will provide feedback on the student's progress toward successfully completing assignments, tests, etc. utilized in grading the course. In addition to the individual course performance, the LMS will also provide feedback on the progress toward successfully completing the program and the courses remaining in order to complete the program.

The LMS will provide and the student will attest that they have received and reviewed the following;

- Student information regarding their standing in relation to the school's satisfactory progress and attendance standards.
- Student performance on both course minimum and program cumulative standards.
- Student progress on previous courses (from end of term progress transcripts).

If a student is not meeting the minimum requirements of on assignments, tests, etc., at the four (4) week and eight (8) week marks, the instructor will notify the student via the LMS and outline an action plan for future improvements. The notification will be recorded electronically.

Students will be graded on reading assignments, activities, viewing of videos by signed self-attestation, and intermediate tests. If passing marks are not achieved, student will be required to utilize supplemental material and self-attest. If the course average is less than 70%, the student will be required to retake lowest scored test(s) until average is 70% or greater.

Students who think that a grade is in error may check by contacting the appropriate instructor through the LMS within 20 days. If the grade is in error, the instructor will take the necessary steps to correct it.

After the one term period, the grade will stand, except in the case of “I” grades, which must be changed within one academic term of their issuance.

Graduation Requirements

Students must complete each course within their program with a 70% average, complete all required courses within the maximum allotted time (See Termination Date), and satisfy all financial obligations to the school to receive a Diploma in the program. Students must also successfully complete the externship portion of the program. Upon successful completion of all requirements within the program and externship, students will receive a Diploma.

Termination Date

Students must complete the entire program with externship within 1.5 times the program length. The program length will be calculated based on the three-year program. Therefore, the maximum allotted time to complete the program is 4.5 years. If the student is enrolled for this entire duration and does not achieve the graduation requirements, they will be terminated from the program.

Transcript Policy

Two certified copies of a student's transcripts will be provided free of charge at time of Graduation. Student records, including the academic transcript, are protected by the FERPA privacy act. Only the student may request a copy of his or her academic record. Family or friends are not permitted access to student records without the written consent of the student.

Only American Denturist School transcripts may be requested or released. Transcripts and documents from other institutions are the property of the American Denturist School and, as such, are under the control of the Director of Admissions. Under federal policy, a student has the right to view the documents in his or her file; the School is not required to provide (or allow the making of) copies of these documents. Transcripts submitted to the American Denturist School for admission become the property of the American Denturist School and cannot be returned to the student or forwarded to other institutions.

Official transcripts will be withheld due to an outstanding account balance whether the student is on a payment plan or not. Grades may be withheld as well due to outstanding account balances. Special circumstances may be reviewed on a case by case basis.

Satisfactory Academic Progress (SAP)

Students must complete all courses in their program with a 70% or higher to maintain Satisfactory Academic Progress (SAP). Students will receive a written progress report at the four-week, eight week, and end of every term (approximately every 12 weeks). The progress report will post all grades by term

as well as the accumulative grade point average and attendance for each course within the program the student has been enrolled and completed.

A student will be considered to be not maintaining SAP if their GPA drops below 2.0. The student will be dismissed from the program and must reapply for enrollment to the program. The Cancellation and Refund policy will apply.

Student Academic Progress (SAP) Appeals Process

Students may file a Satisfactory Academic Progress (SAP) appeal within (5) five business days from the first date of written notice from the school that the student is not maintaining SAP. The SAP appeal should be addressed to the Director of Education of the school and delivered to the administrative front office. The SAP appeal must be in writing, include a brief description of why the student feels the appeals process is warranted and must be accompanied by any documentation that supports the student's request for appeal. The school will review the written appeal within (5) five business days of receipt of the SAP appeals and will set an appeals hearing no later than 30 days from the date the written appeal was received in the administrative front office, all decisions/outcomes will be provided to the student in writing no later than (10) ten business days following the hearing date.

Student Records

The Family Education Rights and Privacy Act (FERPA) afford students certain rights with respect to their education records. These rights include:

1. The right to inspect and review the student's education records within 45 days of the day the school receives a written request for access. A student should submit to the Director of Education a written request that identifies the record(s) the student wishes to inspect. The school official will make arrangements for access and notify the student of the time and place where the records may be inspected under the supervision of a qualified administrative official. Students may request a copy of specific documents at their own expense (fees are .13 cents per page for each copy). No file may leave the supervision of a qualified administrative official.
2. The rights to request the amendment of the student's education records that the student believes are inaccurate, misleading, or otherwise in violation of the student's privacy rights under FERPA. A student who wishes to ask the school to amend a record should write the Director of Education, clearly identify the part of the record the student wants changed, and specify why it should be changed. If the school decides not to amend the record as requested, the school will notify the student in writing of the decision and the student's rights to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing.
3. The right to provide written consent before the school discloses personally identifiable information from the student's education records, except to the extent that FERPA authorizes disclosure without consent. The school discloses education records without a student's prior

written consent under the FERPA exception for disclosure to school officials with legitimate educational interests. A school official is a person employed by the school in an administrative, supervisory, academic or research, or support staff position (including law enforcement unit, personnel and health staff); a person or company with whom the school has contracted as its agent to provide a service instead of using a school employee or official (such as an attorney, auditor, or collection agents. A school official has a legitimate educational interest if the official needs to review an education record in order to fulfill his or her professional responsibilities for the school.

4. The right to file a complaint with the Commission concerning alleged failures by the school to comply with the requirements of FERPA. The name and address of the office that administers FERPA is: Higher Education Coordinating Commission, 775 Court Street NE Salem, OR 97310

Summary of Student Records Security and Storage Protocol

We recognize the trust that our students place in us when handing over their most sensitive information. Protecting our students' confidentiality and safeguarding every document with the utmost care is a priority. Student records will be secured as follows:

- Paper - Access to hard-copy records has a physical security. The hard-copy files are stored in secure area with access only within a locked file cabinet with limited access.
- Electronic - Access to electronic records is controlled through access rights and user privileges within the operating system and within the specific software application. SSL connections (encrypted) and IP address screening—with authentication requirements made at the domain, terminal services and review application layers—our customers' documents are protected from unauthorized access.

Student Standards of Conduct / Code of Conduct

Student Misconduct

Students found guilty of behaviors of misconduct are subject to the disciplinary sanctions detailed in the Discipline Policies. Acts of misconduct include but are not limited to:

1. Furnishing false information to any faculty member or administrator, including forgery, alteration or misuse of any document, record or instrument of identification.
2. Disruption or obstruction of teaching, research, administration, other activities, including school sponsored public-service functions on or off site, or other school authorized activities.
3. Attempted or actual theft of or damage to property of the ADS.
4. Hazing, defined as an act that endangers the mental or physical health or safety of a student, or that destroys or removes public or private property, for the purpose of initiation, admission into, affiliation with, or as a condition of continued membership in, a group or organization.

5. Failure to comply with orders or directions of ADS officials or law enforcement officers acting in performance of their duties, or failure to identify oneself to these persons when requested to do so.
6. Unauthorized possession, duplication or use of keys to any premises or unauthorized entry to, or use of, the ADS.
7. Participation in a campus demonstration that disrupts the normal operations and infringes on the rights of other members of the school; leading or inciting others to disrupt scheduled or normal activities within any building or area; intentional obstruction that unreasonably interferes with freedom of movement, either pedestrian or vehicular, on any site leased or rented by the ADS.
8. Obstruction of the free flow of pedestrian or vehicular traffic on premises or at sponsored or supervised functions.
9. Conduct which is disorderly, lewd, obscene or indecent.
10. Sexual harassment, which is defined as an unwanted sexual advance, or a request for sexual favor, as well as any verbal or physical conduct that results in an unconstrained interchange or that creates a hostile or offensive environment for one of the parties.
11. Any written, verbal, or physical act which intimidates, threatens, degrades, embarrasses, or disgraces an instructor, fellow student, visitor, administrator, employee, or volunteer for any reason.
12. Possession of alcoholic beverages, narcotics or dangerous drugs on school property, or property being used on behalf of the ADS.

Academic Integrity

Students of the ADS are expected to behave as responsible members of the school community and to be honest and ethical in their academic work. The ADS strives to provide students with the knowledge, skills, and judgment they need to function in society as educated adults. To falsify or fabricate the results of one's research, to present the words, ideas, data, or work of another as one's own, or to cheat on an examination corrupts the essential process of higher education.

Adverse Forms of Academic Integrity

Actions constituting violations of academic integrity include, but are not limited to, the following:

Plagiarism: the use of another's words, ideas, data, or product without appropriate acknowledgment, such as copying another's work, presenting someone else's opinions and theories as one's own, or working jointly on a project and then submitting it as one's own.

Cheating: the use or attempted use of unauthorized materials, information, or study aids, or an act of deceit by which a student attempts to misrepresent academic skills or knowledge; unauthorized copying or collaboration.

Fabrication: intentional misrepresentation or invention of any information, such as falsifying research, inventing or exaggerating data, or listing incorrect or fictitious references.

Collusion: assisting another to commit an act of academic dishonesty, such as paying or bribing someone to acquire a test or assignment, taking a test or doing an assignment for someone else, or allowing someone to do these things for one's own benefit.

Discipline policies for misconduct and violations of academic integrity

If a student is found guilty by the Student Disciplinary Panel of violating academic integrity, or student misconduct, he/she will have disciplinary action imposed upon them by the Director Education. A student found guilty of violating academic integrity or exhibiting behaviors of minor misconduct will be subject to the following discipline:

- One written warning with student acknowledgement signature page
- Corrective action plan with Student and Director of Education Signature Page.
- Dismissal from the program upon second violation

Probation/Suspension

The American Denturist School does not place students on probation or suspension.

Dismissal

The following types of major misconduct will warrant immediate dismissal:

- Violence or threats of violence toward others
- Misconduct that causes significant damage to property
- Hazing other students
- Sexual harassment of other students or staff
- Lewd, obscene or indecent conduct
- Possession of illegal drugs at the school
- Any other misconduct that places others at in jeopardy of serious harm or injury

Petitioning for re-entry

Students who have been dismissed due to student misconduct or violating academic integrity who wish to re-enroll in a training program are required to submit a petition in writing to the Director of Education before submitting an admission application. The petition should give a detailed description of the incident. All petitions are handled on a case-by-case basis and will be reviewed by the Director Education. The American Denturist School reserves the right to refuse admission to any student who was terminated for misconduct.

Student Grievance Procedure

A student having a complaint or question concerning any matter associated with the School or the interpretation of any of the provisions in the School Catalog book should follow these procedures. We strongly encourage students with questions and complaints to make them known immediately. No

student will be discriminated or retaliated against for bringing a question or complaint to our attention. As a general rule, all academic questions or complaints regarding course work should be placed with the appropriate instructor for clarification. All other complaints should follow the appropriate chain of command:

1. Person to person. If the student feels this is not effective, the student should;
2. Speak to an instructor/staff member. If you feel the problem has not been addressed;
3. Speak with the Director of Education.

Any signed request or letter will receive a signed response from the appropriate school official within five business days of receipt. You may discuss any grievance with the Director of Education or with one of the owners. If the problem seems to warrant a written complaint, please file the complaint within three business days of the problem. A written response to your complaint will be made within five business days. Any concern is welcome for consideration and resolution from the administrative front office staff and faculty of the American Denturist School.

The American Denturist School is licensed by the Higher Education Coordinating Commission and abides by the Oregon Revised Statutes and the Oregon Administrative Rules intended to regulate private career schools and colleges. Copies of these statutes and rules can be found here:

<http://www.oregon.gov/highered/Pages/index.aspx>

Click the icon for opening a private career school. That will take you to the link for the statute and administrative rule governing private career schools in Oregon.

Students aggrieved by action of the school should attempt to resolve these problems with appropriate school officials. Should this procedure fail, students may contact:

Oregon Higher Education Coordinating Commission
Private Career Schools
255 Capitol Street NE
Salem, OR 97310-0203

Student Services

The American Denturist School is committed to helping students who complete the Denturist Diploma Program find and obtain employment. The ADS has created an area inside the LMS called Career Preparation and Jobs and Business Opportunities that helps enrolled students and graduates with writing resumes and cover letters, including examples of each, preparing for interviews with frequently asked questions, provides links to all major state and national associations for information on membership and attendance of conferences, and finally employment opportunities. The American Denturist School in no way guarantees employment, but will support our students in their search for employment in this rewarding profession.

If your contact information changes (including email) at any time, you are required to contact the Director of Admissions to confirm the changes as soon as possible

Academic Freedom Policy

The American Denturist School embraces a vigorous Academic Freedom Policy. It is defined as follows:

What Academic Freedom means to us:

1. Academic freedom means that both faculty members and students can engage in intellectual debate without fear of censorship or retaliation.
2. Academic freedom establishes a faculty member's right to remain true to his or her pedagogical philosophy and intellectual commitments. It preserves the intellectual integrity of our educational system and thus serves the public good.
3. Academic freedom in teaching means that both faculty members and students can make comparisons and contrasts between subjects taught in a course and any field of human knowledge or period of history.
4. Academic freedom gives both students and faculty the right to express their views — in speech, writing, and through electronic communication, both on and off campus — without fear of sanction, unless the manner of expression substantially impairs the rights of others or, in the case of faculty members, those views demonstrate that they are professionally ignorant, incompetent, or dishonest with regard to their discipline or fields of expertise.
5. Academic freedom gives both students and faculty the right to study and do research on the topics they choose and to draw what conclusions they find consistent with their research, though it does not prevent others from judging whether their work is valuable and their conclusions sound. To protect academic freedom, the ADS opposes efforts by corporate or government sponsors to block dissemination of any research findings.
6. Academic freedom means that the political, religious, or philosophical beliefs of politicians, administrators, and members of the public cannot be imposed on students or faculty.
7. Academic freedom gives faculty members and students the right to seek redress or request a hearing if they believe their rights have been violated.
8. Academic freedom protects faculty members and students from reprisals for disagreeing with administrative policies or proposals.
9. Academic freedom gives faculty members and students the right to challenge one another's views, but not to penalize them for holding them.
10. Academic freedom protects a faculty member's authority to assign grades to students, so long as the grades are not inconsistent or unjust. More broadly, academic freedom encompasses both the individual and institutional right to maintain academic standards.
11. Academic freedom gives faculty members substantial latitude in deciding how to teach the courses for which they are responsible.
12. Academic freedom guarantees that serious charges against a faculty member will be heard before a committee of his or her peers. It provides faculty members the right to due process, including the assumption that the burden of proof lies with those who brought the charges, that

faculty have the right to present counter-evidence and confront their accusers, and be assisted by an attorney in serious cases if they choose.

What it does not mean:

1. Academic freedom does not mean a faculty member can harass, threaten, intimidate, ridicule, or impose his or her views on students.
2. Student academic freedom does not deny faculty members the right to require students to master course material and the fundamentals of the disciplines that they teach.
3. Academic freedom does not protect an incompetent teacher from losing his or her job.
4. Academic freedom does not protect faculty members from colleague or student challenges to or disagreement with their educational philosophy and practices.
5. Academic freedom does not protect faculty members from penalties if they break the law.
6. Academic freedom does not give students or faculty the right to ignore ADS regulations, though it does give faculty and students the right to criticize regulations they believe are unfair.
7. Academic freedom does not protect students or faculty from disciplinary action, but it does require that they receive fair treatment and due process.
8. Academic freedom does not protect faculty members from sanctions for professional misconduct, though sanctions require clear proof established through due process.
9. Academic freedom does not protect a faculty member from various sanctions for poor performance, though such sanctions are regulated by contract and by the team and faculty handbooks.
10. Neither academic freedom nor tenure protects a faculty member who repeatedly skips class or refuses to teach the classes or subject matter assigned.
11. Academic freedom does not protect a faculty member from investigations into allegations of scientific misconduct or violations of ADS policies, nor from appropriate penalties should such charges be sustained in a hearing.

Student Obligations

To ensure the integrity and academic excellence of the school and to ensure that each student derives maximum benefit from his or her Program of studies at the school, students are obliged to:

- (a) read and comply with the Code of Conduct (set out in the School Catalog) and other provisions of the School Catalog (including those in relation to the matters restated here);
- (b) comply with all other School policies, requirements and procedures; (c) conduct coursework with integrity, including submitting their own original work;
- (d) conduct themselves in a professional manner, treat all other students, faculty, volunteers and administrators with respect and refrain from any behavior which may be deemed to be offensive, discriminatory, threatening, bullying or deliberate embarrassment or harassment of others;

- (e) refrain from engaging in deceptive, dishonest or fraudulent behavior, including encouraging or inducing another applicant or student to engage in such behavior; (f) comply with the instructions in the course syllabus and the reasonable directions of instructors;
- (g) participate actively in, course and discussion forums on-line;
- (h) submit assignments and coursework on time and as required;
- (i) maintain Satisfactory Academic Progress as described in the School Catalog; and
- (j) meet all financial obligations to the School.

School Obligations

American Denturist School offers a unique exclusively online learning experience that combines peer-based and collaborative learning, with information technologies and the internet. All learning takes place online, and courses take place over an eleven-week term. Each term has eleven weekly learning units and (at a minimum) two midterms and one final.

To ensure the integrity and academic excellence of the School, and to ensure that students derive maximum benefit from their program of studies at the School, the School is obliged to:

- (a) implement its mission and institutional goals;
- (b) deliver up-to-date and high-quality academic programs and instructional materials, and ensure that academic standards are maintained;
- (c) provide a comprehensive curriculum and courses to enable students to earn sufficient credits toward their diploma program;
- (d) provide student services, academic advising and ancillary support services to help students complete their studies successfully;
- (e) maintain its technological systems to enable students to access their courses, records, forms and School information;
- (f) evaluate and improve its programs, courses and services;
- (g) provide accurate and truthful information regarding its programs and services;
- (h) uphold all School policies and procedures and apply these fairly;
- (i) maintain and protect student records and privacy;
- (j) ensure the engagement of competent and qualified School directors, officials, faculty and employees; and
- (k) manage the School's affairs ethically, financially, responsibly and in full compliance with the law.

Addendum 1 - International Federation of Denturist Baseline Competencies

Knowledge Objectives

- the engineering and scientific basis of dentistry related to the provision of removable dental prosthetic devices, including the mechanisms of knowledge acquisition, applied medical devices methodology and the evaluation of evidence;
- common oral problems treated by removable dental prosthetic devices; the techniques for their diagnosis, treatment planning and treatment; and the maintenance of stable treatment results;
- problems presented by patients that are either directly related to the wearing of removable dental prostheses or could affect the wearing of them;
- the scope and perspective of contemporary removable prosthetic dentistry and its clinical, mechanical and biological basis;
- behavioural science and communication;
- principles of health promotion and disease prevention;
- organisation and provision of health care in the community and in hospital;
- the relevance of business and management skills;
- the broader issues of professional practice, including ethics, medico-legal considerations, health and safety legislation and the maintenance of a safe working environment;
- ways in which medical emergencies and physical and mental illness may affect patients and the psychological response to normal physical and social processes.

Skill Objectives

- demonstrate a wide range of transferable skills, including investigative, analytical, problem solving, planning, communication, presentation and team skills.
- communicate effectively with patients, their families and associates, members of the dental team and other health professionals involved in patient care, and with the public.
- obtain and record a relevant history, interpret a care plan or prescription, and carry out an appropriate examination of the patient as part of the necessary procedures leading to the provision of removable dental prosthetic devices.
- detect the presence of diseases of the oral and related structures, including abnormalities that may require further investigation and, if appropriate, make arrangements for the referral of affected patients.
- evaluate and apply evidence-based treatment and techniques relating to the provision of removable dental prosthetic devices.
- devise and record a comprehensive contract review, perform appropriate visual and tactile assessments, interpret the findings obtained from information available and make provision for further assessment and review.

- interpret and interact with a developed treatment plan for a removable dental prosthetic device and monitor treatment progress, identify problems arising during a course of treatment and propose further treatment options, including preventative and adjunctive treatment.
- undertake, to the highest possible standards, those clinical and dental technology procedures that are within his or her required area of competence, including techniques for prevention of future problems and the ability to enhance the oral health care of individuals.

Attitudinal Objectives

- approaches to teaching and learning that are based on curiosity and exploration of knowledge rather than its passive acquisition;
- a desire to seek and act on evidence, a capacity for self-audit and an appreciation of the need to participate in peer review;
- an awareness of personal limitations, a willingness to seek help as necessary, and an ability to work effectively as a member of the team;
- respect for patients and colleagues that encompasses without prejudice diversity of background and opportunity, language and culture;
- an understanding of patients' rights, particularly with regard to confidentiality and informed consent;
- an awareness of moral and ethical responsibilities involved in the provision of care to individual patients and to populations;
- an appreciation of the importance of honesty and trustworthiness;
- an understanding of audit and clinical governance;
- an awareness that denturists should strive to provide or support the highest quality of patient care at all times;
- an awareness of the importance of one's own health and its impact on the ability to practice as a denturist;
- an awareness of the need for continuing professional development allied to the process of their continuing education, in order to ensure that high levels of clinical competence and knowledge are maintained.

Learning Outcomes

Biomedical Sciences & Oral Biology

- have knowledge and understanding of biomedical sciences, oral physiology and craniofacial, oral and dental anatomy that are significant in the management of their patients
- be familiar with those aspects of general anatomy, physiology and biochemistry relevant to denturism

BEHAVIOURAL SCIENCES & COMMUNICATION SKILLS

- be competent at communication with patients, other members of the dental team and other healthcare professionals
- be familiar with the social and psychological issues relevant to patient care

HUMAN DISEASE

- have knowledge of the scientific principles of sterilisation, disinfection and antisepsis
- be familiar with the pathological features and dental relevance of common diseases and disorders of major organ systems
- be familiar with the main medical conditions that may impinge on the provision of removable dental appliances
- be familiar with the roles of other health care workers
- be familiar with the place of dentistry in the provision of health care
- be familiar with the variety of drugs and treatments used in medical or dental treatment that may affect the provision of removable dental appliances
- be familiar with the role of therapeutics in the management of patients requiring removable dental appliances

MEDICAL EMERGENCIES

- be competent at carrying out resuscitation techniques and immediate management of other medical emergencies which may affect patients during the provision of removable dental appliances

LAW, ETHICS AND PROFESSIONALISM

- be competent at maintaining full, accurate clinical records
- have knowledge of responsibilities of consent, duty of care and confidentiality
- have knowledge of patients rights and how to handle patient complaints
- have knowledge of permitted activities of other dental team members
- have knowledge of the regulatory functions of their licensing board and registration act
- be familiar with the legal and ethical obligations of registered members of the dental team
- be familiar with the obligation to practice in the best interest of patients at all times
- have knowledge of the need for lifelong learning and professional development

HEALTH INFORMATICS

- be competent at using information technology
- be familiar with the law relating to patient records and data protection

HEALTH, SAFETY AND INFECTION CONTROL

- have knowledge of the legal basis of radiographic practice
- be competent at implementing satisfactory infection control for patients and staff

- be familiar with Health and Safety and other relevant legislation and regulations related to the practice of clinical dental technology
- have knowledge of their responsibilities if infected with a transmissible disease which could be a biohazard to patients and other dental team members

RESTORATIVE DENTISTRY RELATED TO REMOVABLE DENTAL APPLIANCES

- be competent at obtaining a detailed history of the patient's dental state
- be competent at obtaining a relevant medical history
- be competent at using laboratory and imaging facilities appropriately and efficiently
- be competent at clinical examination and following a treatment plan
- be competent at arranging appropriate referrals
- be competent at maintaining aseptic techniques throughout procedures related to the provision of removable dental appliances
- be competent at obtaining informed consent
- be competent at performing technical and clinical procedures related to the provision of removable dental appliances
- have knowledge of the management of patients from different social and ethnic backgrounds
- have knowledge of dental problems that may manifest themselves in older patients with removable dental appliances and of the principles involved in managing such problems
- have knowledge of working as part of the dental team
- have knowledge of the procedures carried out by other dental team members in relation to removable dental appliances
- be familiar with the complex interactions between oral health, nutrition, general health, drugs and diseases that can have an impact on the provision of removable dental appliances

GERODONTOLOGY

- be competent at distinguishing between normal and abnormal consequences of ageing
- have knowledge of the problems related to the provision of removable dental appliances to the elderly
- have knowledge of management strategies for the care of the elderly and the interaction of other members of the dental team and health care workers in these strategies
- have knowledge of the presentation of dental and oral diseases and disorders in elderly patients and the range of psychological and social factors affecting these groups

DENTAL IMPLANTS

- have knowledge of the provision and aftercare of removable dental appliances over dental implants
- be familiar with the surgical procedures and after care involved in the provision of dental implants

DENTAL BIOMATERIALS SCIENCE

- have knowledge of the science that underpins the use of dental biomaterials
- have knowledge of the limitations of dental biomaterials
- be familiar with those aspects of biomaterials safety that relate to removable dental appliances
- be familiar with legislation and regulations related to dental biomaterials

PREVENTIVE DENTISTRY

- be familiar with the basic concepts of preventive dentistry
- be familiar with the interaction of other members of the dental team related to preventative dentistry

DENTAL PUBLIC HEALTH

- be familiar with the prevalence of significant dental conditions in their host country
- be familiar with the importance of community – based preventive measures
- be familiar with the social, cultural and environmental factors which contribute to health or illness
- be familiar with the principles of recording oral conditions and evaluating data
- be familiar with the role of dental and other health care workers in relation to dental public health

ORAL MEDICINE, ORAL PATHOLOGY AND MICROBIOLOGY

- Be competent at recognising abnormal oral mucosa and related underlying structures and at making appropriate referrals
- have knowledge of matters relating to infection control
- be familiar with various relevant investigative diagnostic procedures and the significance of their results
- be familiar with the pathogenesis and classification of oral diseases
- be familiar with the aetiology, prognosis and processes of oral diseases
- be familiar with the causes and effects of common or significant oral diseases and with their prevention, diagnosis and management

DENTAL RADIOLOGY AND IMAGING

- be competent at taking and processing relevant film views related to the provision of removable dental appliances
- have knowledge of radiographic interpretation and be able to provide relevant information to other members of the dental team
- have knowledge of the hazards of ionising radiation and regulations relating to them, including radiation protection and dose reduction
- be familiar with the principles which underlie dental radiographic techniques

PAIN AND ANXIETY CONTROL

- be competent at when and how to refer patients for anxiety and pain control procedures
- be competent at managing fear and anxiety with behavioural techniques and empathise with patients in stressful situations related to the provision of removable dental appliances
- be familiar with the manifestations of anxiety and pain relating to the provision of removable dental appliances

Addendum 2 - The Denturist Association of Canada

Competencies and Learning Outcomes

1. Apply knowledge of anatomy, orofacial anatomy, physiology, morphology, pathology, periodontology, histology, embryology along with behavioural biomedical and oral health sciences as they apply to Denturism.
2. Apply knowledge and skills of dental theory, patient assessment, treatment planning, practice management and dental psychology in patient care.
3. Apply knowledge and skills of health and safety, including Occupational Health & Safety requirements and WHMIS requirements, within the clinical and laboratory settings.
4. Apply knowledge and skills related to pharmacology, infection prevention and control, and emergency care within the clinical and laboratory settings.
5. Apply knowledge and skills to assess a patient, provide viable treatment plans and provide the following procedures for the patient:
 - a) *Single complete dentures opposing natural dentition;
 - b) *Complete maxillary and mandibular dentures;
 - c) *Acrylic and Cast Partial maxillary and mandibular dentures;
 - d) *Laboratory processed relines and rebases for both complete and partial dentures;
 - e) *Chairside reline or simulation;
 - f) *Tissue Conditioning or simulation;
 - g) *Immediate complete and partial dentures or simulation;
 - h) *Implant retained complete and partial prosthesis or simulation;
 - i) *Overdentures or simulation;
 - j) *Repairs, additions and adjustments to both complete and partial dentures;
 - k) *Radiography – techniques and interpretation;
 - l) *Mouthguards;
 - m) *Anti-snoring appliances;
 - n) *Bruxism appliances;
 - o) *Tooth whitening procedures;
 - p) Required /appropriate patient record keeping;
 - q) Must have the knowledge of Regulatory issues and scope of practice/legally allowable services, as it relates to the respective Province or Territory; and Any other related skills that are deemed necessary or helpful in the practice of Denturism

Addendum 3 - United Kingdom General Dental Council Preparing for Practice Learning Outcomes

Clinical Dental Technicians

Upon registration with the GDC the registrant will be able to demonstrate the outcomes as relevant to the practice of clinical dental technology and patient care.

1 Individual patient care

1.1 Foundations of practice

The registrant will be able to apply to the practice of clinical dental technology principles that derive from the biomedical, behavioural, engineering and materials sciences. The registrant will recognise and take account of the needs of different patient groups including children, adults, older people, and those with special care requirements throughout the patient care process.

1.1.1 Describe the principles of an evidence-based approach to learning, clinical and professional practice and decision making

1.1.2 Explain the range of normal human structures and functions with particular reference to oral disease and treatment

1.1.3 Recognise abnormalities of the oral cavity and the rest of the patient and raise concerns where appropriate

1.1.4 Explain the aetiology and pathogenesis of oral disease

1.1.5 Describe relevant dental, oral and general anatomy and their application to patient management

1.1.6 Describe relevant physiology and its application to patient management

1.1.7 Explain the potential routes of transmission of infectious agents in dental practice, mechanisms for the prevention of infection, the scientific principles of decontamination and disinfection and their relevance to health and safety

1.1.8 Describe the scientific principles underpinning the use of materials and biomaterials and discuss their limitations and selection, with particular emphasis on those used in dentistry

1.1.9 Explain and apply the scientific principles of medical ionizing radiation and statutory regulations

1.1.10 Describe psychological and sociological aspects of health, illness, behavioural change and disease

1.2 Contribution to patient assessment

1.2.1 Recognise the importance of and carry out an appropriate systematic intra and extra-oral clinical examination

1.2.2 Recognise the importance of and record a comprehensive and contemporaneous patient history

- 1.2.3 Recognise the significance of changes in the patient's reported oral health status and take appropriate action
- 1.2.4 Undertake relevant special investigations and diagnostic procedures, including radiography
- 1.2.5 Assess patients' levels of anxiety, experience and expectations in respect of dental care
- 1.2.6 Discuss the importance of each component of the patient assessment process

- 1.3 Patient assessment (edentulous patient)
 - 1.3.1 Obtain, record, and interpret a comprehensive and contemporaneous patient history
 - 1.3.2 Undertake an appropriate systematic intra and extra-oral clinical examination
 - 1.3.3 Manage appropriate clinical and laboratory investigations
 - 1.3.4 Undertake relevant special investigations and diagnostic procedures, including radiography

- 1.4 Diagnosis (edentulous patient)
 - 1.4.1 For the edentulous patient formulate a differential diagnosis

- 1.5 Treatment planning (edentulous patient)
 - 1.5.1 For the edentulous patient formulate an appropriate treatment plan based on the patient assessment and diagnosis

- 1.6 Responding to the treatment plan
 - 1.6.1 Explain the principles of obtaining valid patient consent
 - 1.6.2 Obtain valid consent from the patient before starting treatment, explaining all relevant options and the possible costs
 - 1.6.3 Provide care as outlined in a treatment plan or prescription and plan the delivery in the most appropriate way for the patient
 - 1.6.4 Identify where patients' needs may differ from the treatment plan or prescription and refer patients for advice or treatment where appropriate
 - 1.6.5 Recognise abnormalities of the oral cavity and the rest of the patient and raise concerns where appropriate
 - 1.6.6 Discuss the role of the clinical dental technician and other members of the dental team in the treatment plan

- 1.7 Patient management
 - 1.7.1 Treat all patients with equality, respect and dignity
 - 1.7.2 Explain the impact of medical and psychological conditions in the patient
 - 1.7.3 Recognise the need to monitor and review treatment outcomes
 - 1.7.4 Manage patient anxiety and pain through effective communication, reassurance and relevant behavioural techniques and refer where appropriate
 - 1.7.5 Recognise and take responsibility for understanding the management and organisation of local referral networks local clinical guidelines and policies

1.7.6 Discuss the role of the clinical dental technician and other members of the dental team in the patient management process

1.8 Patient and public safety

1.8.1 Recognise the risks around the clinical environment and manage these in a safe and efficient manner

1.8.2 Implement and perform effective decontamination and infection control procedures according to current guidelines

1.8.3 Take responsibility for ensuring compliance with current best practice guidelines and European manufacturing legislation

1.8.4 Recognise and take responsibility for the fitness for purpose of custom made dental devices provided

1.8.5 Recognise and manage medical emergencies

1.8.6 Explain the importance of and maintain contemporaneous, complete and accurate patient records in accordance with legal requirements and best practice

1.8.7 Recognise the signs of abuse or neglect and describe local and national systems and raise concerns where appropriate

1.9 Treatment of acute oral conditions

1.9.1 Recognise and manage patients with acute oral conditions ensuring involvement of appropriate dental team members

1.10 Health promotion and disease prevention

1.10.1 Explain the principles of preventive care

1.10.2 Explain how the design and manufacture of custom made dental devices can contribute to the prevention of oral disease and the interests of the patient's long term oral health, safety and well-being

1.10.3 Evaluate and apply the principles of evidence based and appropriate design in the manufacture and provision of custom made dental devices

1.10.4 Provide patients with comprehensive and accurate preventive education and instruction in a manner which encourages self-care and motivation

1.10.5 Underpin all patient care with a preventive approach that contributes to the patient's long-term oral and general health

1.10.6 Assess the results of treatment and provide aftercare and ongoing preventive advice

1.10.7 Describe the health risks of diet, drugs and substance misuse, and substances such as tobacco and alcohol on oral and general health and provide appropriate information and support

1.14 Replacement of teeth

1.14.1 Design, manufacture, assess and provide biomechanically sound removable devices

1.14.2 Design, manufacture, assess and provide biomechanically sound fixed prostheses

- 1.14.3 Design, manufacture, assess and provide biomechanically sound orthodontic appliances
- 1.14.4 Repair custom made dental devices to meet the needs of the patient
- 1.14.5 Repair and modify custom made dental devices
- 1.14.6 Evaluate, for individual patients, the need for more complex treatment and seek advice
- 1.14.7 Fit devices and appliances for the oral cavity according to prescription
- 1.14.8 Fit biomechanically sound complete dentures
- 1.14.9 Explain the role of the clinical dental technician in the replacement of teeth

2 Population-based health and care

- 2.1 Describe the basic principles of a population health approach including demographic and social trends, UK and international oral health trends, determinants of health and inequalities in health, the ways in which these are measured and current patterns
- 2.2 Explain the dental and wider healthcare systems dental professionals work within including health policy and organisation, delivery of healthcare and equity
- 2.3 Describe and evaluate the role of health promotion in terms of the changing environment, community and individual behaviours to deliver health gain
- 2.4 Explain evidence-based prevention and apply appropriately
- 2.5 Describe the principles of planning oral health care for communities to meet needs and demands

Communication

The registrant must recognise the importance of appropriate communication in healthcare at all times and through all media. Upon registration with the GDC the registrant will be able to:

3 Patients, their representatives and the public

- 3.1 Communicate appropriately, effectively and sensitively at all times with and about patients, their representatives and the general public and in relation to:
 - patients with anxious or challenging behavior
 - referring patients to colleagues, particularly where patients are from diverse backgrounds or there are barriers to patient communication
 - difficult circumstances, such as when breaking bad news, and when discussing issues, such as alcohol consumption, smoking or diet
- 3.2 Recognise the importance of non-verbal communication, including listening skills, and barriers to effective communication
- 3.3 Explain and check patients' understanding of treatments, options, costs and valid consent
- 3.4 Obtain valid consent

4 Team and the wider healthcare environment

- 4.1 Communicate effectively with colleagues from dental and other healthcare professions in relation to the direct care of individual patients, including oral health promotion

- 4.2 Explain the role of appraisal, training and review of colleagues, and giving and receiving effective feedback
- 4.3 Give and receive feedback effectively to and from other members of the team
- 4.4 Communicate appropriately and effectively in professional discussions and transactions within the health and other sectors

5 Generic communication skills

- 5.1 Communicate effectively and sensitively by spoken, written and electronic methods and maintain and develop these skills
- 5.2 Use appropriate methods to provide accurate, clear and comprehensive information when referring patients to other dental and healthcare professionals
- 5.3 Explain the importance of and maintain contemporaneous, complete and accurate patient records in accordance with legal requirements and best practice
- 5.4 Recognise the use of a range of communication methods and technologies and their appropriate application in support of clinical practice
- 5.5 Recognise and act within the principles of information

Professionalism

Upon registration with the GDC the registrant will be able to:

6 Patients and the public

- 6.1 Put patients' interests first and act to protect them
- 6.2 Be honest and act with integrity
- 6.3 Respect patients' dignity and choices
- 6.4 Maintain and protect patients' information
- 6.5 Recognise and respect the patient's perspective and expectations of dental care and the role of the dental team taking into account current equality and diversity legislation, noting that this may differ in England, Scotland, Wales and Northern Ireland

7 Ethical and legal

- 7.1 Be familiar with and act within the GDC's standards and within other professionally relevant laws, ethical guidance and systems
- 7.2 Recognise and act upon the legal and ethical responsibilities involved in protecting and promoting the health of individual patients
- 7.3 Act without discrimination and show respect for patients, colleagues and peers and the general public
- 7.4 Recognise the importance of candour and effective communication with patients when things go wrong, knowing how and where to report any patient safety issues which arise
- 7.5 Take responsibility for and act to raise concerns about your own or others' health, behaviour or professional performance as described in *Standards for the Dental Team Principle 8*
Raise concerns if patients are at risk

8 Teamwork

- 8.1 Describe and respect the roles of dental and other healthcare professionals in the context of learning and working in a dental and wider healthcare team
- 8.2 Ensure that any team you are involved in works together to provide appropriate dental care for patients
- 8.3 Explain the contribution that team members and effective team working makes to the delivery of safe and effective high quality care

9 Development of self and others

- 9.1 Recognise and demonstrate own professional responsibility in the development of self and the rest of the team
- 9.2 Utilise the provision and receipt of effective feedback in the professional development of self and others
- 9.3 Explain the range of learning and teaching methods and the importance of assessment, feedback, critical reflection, identification of learning needs and appraisal in personal development planning
- 9.4 Develop and maintain professional knowledge and competence and demonstrate commitment to lifelong learning
- 9.5 Recognise and evaluate the impact of new techniques and technologies in clinical practice
- 9.6 Accurately assess own capabilities and limitations in the interest of high quality patient care and seek advice from supervisors or colleagues where appropriate
- 9.7 Describe and demonstrate the attributes of professional attitudes and behaviour in all environments and media

Management and leadership

Upon registration with the GDC the registrant will be able to:

10 Managing self

- 10.1 Put patients' interests first and act to protect them
- 10.2 Effectively manage their own time and resources
- 10.3 Recognise the impact of personal behaviour and manage this professionally
- 10.4 Recognise the range of skills and knowledge that contribute to effective management and leadership
- 10.5 When appropriate act as an advocate for patient needs
- 10.6 Take responsibility for personal development planning, recording of evidence, and reflective practice
- 10.7 Ensure that all aspects of practice comply with legal and regulatory requirements
- 10.8 Demonstrate appropriate continuous improvement activities

11 Working with others

- 11.1 Take a patient-centred approach to working with the dental and wider healthcare team

11.2 Recognise and respect own and others' contribution to the dental and wider healthcare team and demonstrate effective team working.

11.3 Recognise and demonstrate personal accountability to patients, the regulator, the team and wider community

11.4 Recognise and comply with the team working requirements in the *Scope of Practice* and *Standards* documents

11.5 Describe the impact of Direct Access on each registrant group's scope of practice and its effect on dental team working

11.6 Recognise, take responsibility for and act to raise concerns about their own or others' health, behaviour or professional performance as described in *Standards for the Dental Team, Principle 8*

11.7 Recognise the need to ensure that those who raise concerns are protected from discrimination or other detrimental effect

12 Managing the clinical and working environment

12.1 Recognise and comply with systems and processes to support safe patient care

12.2 Recognise the need for effective recorded maintenance and testing of equipment and requirements for appropriate storage, handling and use of materials

12.3 Recognise and demonstrate the procedures for handling of complaints as described in *Standards for the Dental Team, Principle 5*

12.4 Describe the legal, financial and ethical issues associated with managing a dental practice

12.5 Recognise and comply with national and local clinical governance and health and safety requirements

Addendum 4 - Oregon Board of Dental Technology Denture Technology Curriculum Objectives

1.00 GENERAL ANATOMY AND PHYSIOLOGY

Introduction To The Human Body

- 1.1 Define anatomy and physiology.
- 1.2 List the principle body cavities and the organs contained within them.
- 1.3 Identify the different levels of complexity found in the human body: (e.g., molecule, cell, tissues, organ system).
- 1.4 Define metabolism, catabolism and anabolism, homeostasis.
- 1.5 Describe the three major planes of section:
 - 1.5.1 coronal
 - 1.5.2 transverse
 - 1.5.3 sagittal

Cells, Tissues and Glands Replaced by text of 3.1

- 1.6 Identify each major cellular component at the microscopic level and describe the function of each component.
 - 1.6.1 Cytoplasmic organelles
 - 1.6.2 Nucleus and its contents
 - Nucleoli
 - Nuclear membrane
 - Nuclear pore
 - Chromatin and chromosomes

- 1.6.3 Describe the path of a protein molecule from its site of synthesis to intercellular space.
- 1.7 Define the terms mitosis and meiosis and identify the purpose of each.
- 1.8 Identify the fluid compartments of the body, comparing and contrasting their composition and volume.
- 1.9 Define the transport mechanisms by which substances move between the body's compartments, stating an example of each:
- 1.9.1 diffusion
 - 1.9.2 osmosis
 - 1.9.3 filtration
 - 1.9.4 active transport
 - 1.9.5 phagocytosis
 - 1.9.6 facilitated diffusion
- 1.10 State normal blood pH.
- 1.11 Define the following terms.
- 1.11.1 acid
 - 1.11.2 base
 - 1.11.3 pH
 - 1.11.4 buffer
- 1.12 Define the term tissue.
- 1.13 Briefly describe the following:
- 1.13.1 epithelial tissue
 - 1.13.2 connective tissue
 - 1.13.3 muscle
 - 1.13.4 nervous tissue
- 1.14 Define the term gland and distinguish between exocrine and endocrine glands giving examples of each.

The Skeletal System

- 1.15 Describe the functions of the skeletal system.
- 1.16 Describe the histological features of compact and spongy bone.
- 1.17 Describe the process of bone development and remodeling.
- 1.18 List the five principle shapes of bones in the skeleton, giving an example of each.
- 1.19 Define the term "bony landmark" and give examples.
- 1.20 Describe the structure and movements of fibrous, cartilaginous and synovial joints.

Muscular System

- 1.21 Identify the functions of muscle tissue.
- 1.22 Describe the relationship of blood vessels and nerves to skeletal muscles.
- 1.23 Describe the relationship involving bones and joint articulations in producing body movements.

The Nervous System

- 1.24 Identify the functions of the nervous system.
- 1.25 Describe the organization of the nervous system.
- 1.26 Describe the generation and propagation of a nerve impulse.
- 1.27 Define synapse.
- 1.28 Explain the role of neurotransmitters.
- 1.29 Define reflexes and list general characteristics of all reflexes.
- 1.30 Briefly describe the meninges, including their function.

- 1.31 Describe the manufacture, circulation and function of cerebrospinal fluid.
- 1.32 Describe the structure and function of the spinal cord.
- 1.33 Briefly describe the structure of the brain, including the location and functions(s) of

- 1.33.1 cerebral cortex
- 1.33.2 white matter
- 1.33.3 basal ganglia
- 1.33.4 thalamus
- 1.33.5 hypothalamus
- 1.33.6 cerebellum
- 1.33.7 pons
- 1.33.8 medulla oblongata
- 1.33.9 reticulate formation

- 1.34 Identify the two divisions of the autonomic nervous system.
- 1.35 Describe the function of each division of the autonomic nervous system, including their effects on the other body systems.
- 1.36 List the 12 pairs of cranial nerves and describe their distribution.

The Cardiovascular System

- 1.37 List the functions of the cardiovascular system.
- 1.38 Describe the structure and functions of erythrocytes, leukocytes, and thrombocytes.
- 1.39 Describe the mechanism of hemostasis, including both factors which would promote blood clotting and those that would inhibit it.
- 1.40 Describe the structures of the heart, including the :
- 1.40.1 pericardium
 - 1.40.2 myocardium
 - 1.40.3 endocardium
 - 1.40.4 chambers
 - 1.40.5 valves
- 1.41 Define coronary circulation and identify the 2 major arteries.

- 1.42 Define automaticity.
- 1.43 Identify the components of the heart's conduction system, including the function of each.
- 1.44 Describe the events of the cardiac cycle.
- 1.45 Define cardiac output and identify factors which affect it.
- 1.46 Describe and differentiate between the structure and function of arteries, arterioles, capillaries, venules, and veins.
- 1.47 List and identify the major arteries and veins of systemic circulation.
- 1.48 Describe capillary dynamics.
- 1.49 Define blood pressure.
- 1.50 Identify the normal values for blood pressure.
- 1.51 Identify factors which would affect blood pressure.

The Lymphatic System

- 1.52 Describe the components and functions of the lymphatic system.
- 1.53 Identify the functions of the tonsils, spleen, and thymus gland.

The Respiratory System

- 1.54 Identify the functions of the respiratory system.
- 1.55 Briefly describe the structure and functions of each of the following:
 - 1.55.1 pharynx
 - 1.55.2 larynx
 - 1.55.3 trachea
- 1.56 Briefly describe the structure of the bronchial tree.
- 1.57 Briefly describe the mechanics of respiration.

- 1.58 Identify factors which control and influence respiration.
- 1.59 Describe alveolar gas exchange.
- 1.60 Identify how gases are transported in the blood.
- 1.61 Briefly describe the respiratory system's role in maintaining acid-base balance.

The Urinary System

- 1.62 List the functions of the urinary system.
- 1.63 Briefly describe the structure of the kidneys.
- 1.64 Briefly describe the mechanism of formation of urine, identifying factors which would affect it.
- 1.65 Describe the normal composition and volume of urine.
- 1.66 Briefly describe the role of the urinary system in regulation of:
 - 1.66.1 blood pressure
 - 1.66.2 fluid and electrolyte balance
 - 1.66.3 acid-base balance
- 1.67 Briefly identify the structure and function of:
 - 1.67.1 the ureters
 - 1.67.2 urinary bladder
 - 1.67.3 urethra
- 1.68 Define micturition.

The Digestive System

- 1.69 Describe the components and functions of the digestive system.

The Reproductive System

- 1.70 Describe the components and functions of the reproductive system.

The Endocrine System

1.71 Locate and describe the function of the endocrine glands.

1.72 Identify the function of the endocrine system.

1.73 Identify the location of each of the following glands, and the function(s) of the specified hormones:

1.73.1 pituitary:

- (a) growth hormone
- (b) antidiuretic hormone

1.73.2 thyroid

- (a) thyroxin (b) thyrocalcitonin

1.73.3 parathyroids:

1.73.4 adrenals

- (a) epinephrine & norepinephrine
- (b) aldosterone
- (c) glucocorticoids

1.73.5 pancreas

- (a) glucagon
- (b) insulin

2.00 OROFACIAL ANATOMY

Head & Neck Anatomy

Bones

2.1 Identify the composition and purpose of bone.

2.2 Describe the structure and development of bone.

2.3 Explain divisions and classifications of bone.

2.4 Identify and describe bones of the cranium and state their function.

2.5 Identify sutures of the skull and describe their formation.

- 2.6 Identify and describe the bones of the face and state their function.
- 2.7 Identify and describe the structure and function of the mandible. (See 2.8)
- 2.8 Describe the structure and function of the maxilla.
- 2.9 Describe the functions of the nasal cavity and para-nasal sinuses.

Muscles

- 2.10 Identify major muscles of mastication, their origin and insertion and describe their actions. (See also 14.3)
- 2.11 Identify the suprahyoids as a group, their origin and insertion and describe their actions.
- 2.12 Identify the infrahyoids as a group, their attachments and describe their functions.
- 2.13 Identify the platysma muscle, its origin, insertion and describe its action.
- 2.14 Identify the posterior musculature of the neck, their origin, insertion and describe the actions.
- 2.15 Identify the muscles of facial expression, their origin, insertion and describe their actions. (See also 14.3)
- 2.16 Identify the intrinsic and extrinsic muscles of the tongue, their location and describe their actions.

Circulatory System

Arteries

- 2.17 Identify and describe the circulatory system of the head and neck.
- 2.18 Identify and describe arteries of the head and neck including their branches and functions.
- 2.19 Identify and describe the pathway of the Circle of Willis.

Veins

2.20 Identify and describe the groups of veins of the head and neck and their functions.

2.21 Identify and describe the pathway of the venous sinuses.

Nervous System

2.22 Describe the relation between the peripheral nervous system and the cranial nerves.

2.23 Explain the relation between the autonomic nervous system and three divisions of the trigeminal nerve.

2.24 Define proprioception and relate this term to movement of the mandible and the TMJ.

Nerves

2.25 Explain the coordination of receptors and effectors in regulating nerve impulses.

2.26 Identify and state origins and exits (or entrances) of each of the twelve pairs of cranial nerves.

2.27 Describe the basic functions of each pair of cranial nerves.

2.28 Describe the functional components of cranial nerves: V, VII, IX, XII.

2.29 List the cranial nerves that are most pertinent to denturist practitioners.

2.30 Describe the origin, pathway, site of exit, structures innervated and functional components of the trigeminal nerve.

2.31 Identify any muscle (other than masticatory) which is innervated by the trigeminal nerve.

2.32 Describe the origin, pathway, site of exit, structures innervated and function components of the facial nerve.

2.33 Identify the origin and trace the pathway of the glossopharyngeal nerve and its branches.

2.34 Identify the origin and trace the pathway of the vagus nerve and its branches.

Lymphatic System

- 2.35 Define the lymphatic system and its components.
- 2.36 Explain the importance of the lymphatic system as it relates to the health and proper function of the body.
- 2.37 Identify superficial and deep nodes of the head and neck and describe their respective functions and routes of drainage.
- 2.38 List locations of the superficial parotid, deep parotid, posterior auricular, occipital nodes, submandibular and submental nodes and identify drainage areas.
- 2.39 Identify and explain how palatine, pharyngeal and lingual tonsils assist in maintaining health.

Salivary Glands (See also 3.8)

- 2.40 Identify major and minor salivary glands, locate and describe their function.
- 2.41 List major components of saliva.
- 2.42 Describe the functions of saliva.
- 2.43 Describe the innervation to the major salivary glands and the autonomic system control.

Dental Anatomy

Oral Cavity

- 2.44. Identify the anatomical landmarks of the oral cavity and the pharynx.

Teeth

- 2.45 Describe the supporting and associated structures of the teeth.
- 2.46 Describe the development of the teeth and their supporting structures.

- 2.47 List and describe individual primary and permanent dentition utilizing the Universal, Palmer and FDI system.
- 2.48 Define primary, mixed and permanent dentition.
- 2.49 State the general sequence of eruption of primary (deciduous) and permanent dentitions.
- 2.50 Identify the anatomical structures and landmarks of anterior and posterior teeth in the permanent and primary dentition.
- 2.51 Describe the mandibular positions and movements in relation to articulation of teeth.
- 2.52 Identify and describe Angle's classification of malocclusion.

Temporomandibular Joint

- 2.53 Identify the components of the temporomandibular joint (TMJ).
- 2.54 Describe the structure and functions of the TMJ.
- 2.55 Identify the ligaments associated with the TMJ, their locations and describe their functions.

Anomalies

- 2.56 Define and recognize common dental anomalies and developmental disturbances.
- 2.57 (See 4.1.3)

3.00 GENERAL HISTOLOGY (See also 1.12 and 1.13)

(3.1 moved to 1.6)

- 3.2 Identify the microscopic structure of epithelial tissue and discuss the function of each component.
- 3.2.1 Locate, describe and give the prime function of the various epithelial cells.
 - 3.2.2 Illustrate the relationship of the ultrastructure of a Goblet cell to its function.
 - 3.2.3 Describe the structure of the basement membrane.
 - 3.2.4 Discuss the similarities and differences between keratinized and nonkeratinized epithelium of the oral mucosa and list the chief distribution in the oral cavity.
 - 3.2.5 Describe surface specializations such as keratin, microvilli and cilia.
 - 3.2.6 Discuss the histology of the following clinical conditions:
 - linea alba
 - nicotine stomatitis
 - (Duplicates 7.116) 3.2.7
 - Describe the histology of stippling.
 - 3.2.8 Describe the age change that takes place in the epithelia of the oral cavity.
 - 3.2.9 Discuss the change in the oral epithelium following:
 - the insertion of a new denture
 - the prolonged wearing of a denture
- 3.3 Describe the microscopic structure of connective tissue and discuss the function of each component.
- 3.3.1 Discuss the importance of collagen in the structure and function of the tooth.
 - 3.3.2 Describe and identify the fibrous components of connective tissue and the functional significance of collagen, elastin and reticulin.
 - 3.3.3 Describe, identify and state the function of the following the cellular components of connective tissue:
 - fibroblasts
 - fibrocytes
 - fat cells
 - histiocytes/macrophages

- mast cells
 - plasma cells
 - undifferentiated mesenchymal cells
- 3.3.4 Discuss the origin of macrophages
- 3.3.5 Describe and discuss dense fibrous regularly and irregularly arranged connective tissue.
- 3.3.6 Describe the histology of a tendon and tendon regeneration.
- 3.4 Discuss and describe the specialized connective tissue of blood and the inflammatory process.
- 3.4.1 Recognize, describe and give the prime function of granular leukocytes (neutrophils, eosinophils, basophils) and agranular leukocytes (lymphocytes and monocytes).
- 3.4.2 Discuss the accumulation of neutrophils at the site of infection and the components of a purulent exudate.
- 3.4.3 Discuss eosinophilic and basophilic involvement in allergic and inflammatory reactions.
- 3.4.4 Describe the fate of lymphocytes when they are stimulated with an appropriate antigen.
- 3.4.5 Discuss the structure and function of erythrocytes and platelets.
- 3.4.6 Outline the vascular and cellular response for acute denture stomatitis.
- 3.4.7 (moved to 6.46.5)
- 3.4.8 Describe the components of crevicular fluid found in gingival inflammation.
- 3.5 Describe the histology of each of the following conditions:
- 3.5.1 tissue atrophy
- 3.5.2 tissue hypertrophy
- 3.5.3 tissue aplasia
- 3.5.4 bone atrophy
- 3.6 Explain the function and differentiate between a "blast" cell and a "clast" cell.
- 3.7 Describe oral mucosa and differentiate between the function of masticatory and lining mucosa.
- 3.8 Identify and describe the function of major and minor salivary glands.

- 3.8.1 (Duplicates 1.14)
- 3.8.2 Construct and label diagrams of serous acini, mucous acini and serous demilunes.
- 3.8.3 Distinguish between interlobar, interlobular and intralobular ducts by means of a fully labelled diagram.
- 3.8.4 Discuss the histology of the major and minor salivary glands.
- 3.8.5 (Duplicates 7.126.5)
- 3.8.6 Discuss the relation of saliva to dentures.
- 3.9 Identify the microscopic structure of bone and describe the function of each component.
 - 3.9.1 Discuss the intercellular substance of bone.
 - 3.9.2 Discuss the ability of bone to provide solid support and at the same time provide adequate nutrition to its osteocytes.
 - 3.9.3 Distinguish between immature and mature bone.
 - 3.9.4 Distinguish whether bone deposition or bone resorption is occurring in a particular location.
 - 3.9.5 Describe and label an osteogenic cell, an osteoblast, an osteocyte and an osteoclast.
 - 3.9.6 Distinguish between intramembranous and endochondral ossification.
 - 3.9.7 Describe the structure of long bones.
- 3.10 Identify and describe the function of all types of cartilage.
 - 3.10.1 List and describe the characteristics of cartilage.
 - 3.10.2 Describe the manner in which chondrocytes are nourished and their fate when intercellular substance around them calcifies.
 - 3.10.3 Describe the two methods of cartilage growth.
 - 3.10.4 Describe and label diagrams that represent hyaline, elastic and fibrocartilage.
 - 3.10.5 Describe and label a chondrogenic cell, a young chondroblast and a mature chondrocyte.
- 3.11 Identify the microscopic structure of muscle tissue and describe the function of each component.
 - 3.11.1 Describe and label diagrams of smooth, striated and cardiac muscle.
 - 3.11.2 Discuss the component parts of a muscle fiber involved in contraction.
 - 3.11.3 Draw a sarcomere in a relaxed and a contracted state.
 - 3.11.4 Discuss the differences between cardiac and skeletal muscle.

3.11.5 Define and explain the functions of:

3.11.5.1 sarcomere

3.11.5.2 sarcoplasm

3.11.5.3 sarcoplasmic reticulum

3.11.5.4 sarcolemma

4.00 DENTAL HISTOLOGY AND EMBRYOLOGY

4.1 Describe the development of the face and oral cavity.

4.1.1 List the three embryonic layers that give rise to the entire human.

4.1.2 Describe the stomodeum

4.1.3 Describe the following facial malformations:

- macrostomia
- microstomia
- cleft lip
- cleft palate
- macroglossia
- microglossia
- aglossia

4.2 Describe the development, structure and function of teeth.

4.2.1 Define the following terms and list the stages of tooth development by means of a time line.

- initiation
- proliferation
- histodifferentiation
- morphodifferentiation
- apposition
- calcification and maturation
- eruption

4.2.2 List the basic structures that collectively comprise the enamel organ.

4.2.3 State the origin of enamel, dentin, pulp, periodontal ligament, cementum and the alveolus.

4.2.4 Describe and discuss the following:

- the fate of the dental lamina
 - the fate of the secondary lamina
 - the vestibular lamina
 - the outer and inner enamel epithelium, the stellate reticulum, stratum intermedium, Hertwig's epithelial root sheath and root formation.
- 4.2.5 Describe amelogenesis and list three defects.
- 4.2.6 Discuss the architecture of enamel, including enamel rods, rod sheaths, and interplasmic substance.
- 4.2.7 Describe the specific histological features of enamel and include Hunter-schreger bands, incremental lines of Retzius, neonatal line, perikymata, primary enamel cuticle.
- 4.2.8 Distinguish among enamel lamellae, enamel spindles and enamel tufts.
- 4.2.9 Illustrate dentinogenesis, discuss the differences between mantle dentin and circumpulpal dentin formation.
- 4.2.10 Describe the histology of:
- 4.2.10.1 lines of von Ebner
 - 4.2.10.2 contour lines of Owen
 - 4.2.10.3 neonatal lines
 - 4.2.10.4 interglobular dentin
 - 4.2.10.5 Tomes' granular layer
- 4.2.11 Describe peritubular and intertubular matrices, dentinal tubules and odontoblast processes.
- 4.2.12 Describe regular physiological secondary dentin versus reparative dentin.
- 4.2.13 State the clinical significance of dead tracts and sclerotic dentin.
- 4.2.14 Describe dentinogenesis imperfecta.
- 4.2.15 Describe dental pulp cells and discuss the functions of dental pulp.
- 4.2.16 Describe the sensory nerve ending found in dental pulp tissue.
- 4.2.17 (Definition for term not found)
- 4.3 Describe the processes of exfoliation of natural teeth.
- 4.4 Describe the histology and functions of the periodontium.
- 4.4.1 Describe the functions of the periodontal ligament and each of the principal fiber groups.

- 4.4.2 Describe the cell rests of Malassez and state their clinical significance.
 - 4.4.3 Describe the role of the accessory canals in the spread of dental disease.
 - 4.4.4 Describe cementogenesis.
 - 4.4.5 Distinguish between the histology of acellular and cellular cementum and the functions of cementum.
 - 4.4.6 Describe the varieties of junctions that are found between enamel and cementum.
- 4.5 Describe the histology of the alveolar process and list causes of resorption of the alveolar process.
- 4.5.1 Describe the alveolar process and state two names for the alveolar bone proper.
 - 4.5.2 List the structural elements of bone tissue.
 - 4.5.3 List the types of bone classified according to function.
 - 4.5.4 State the structure, function and location of Sharpey's fibers.
 - 4.5.5 Discuss bone changes during orthodontic movement.
- 4.6 Describe and list the steps in hard tissue genesis.
- 4.6.1 Describe the organic and inorganic contents of the four hard tissues of the body; bone, cementum, dentin and enamel.
 - 4.6.2 Compare and contrast the hard tissues of the tooth. 4.6.3
(Not related to denturist practice)
- 4.7 Describe the histology of the four types of papillae found on the tongue and discuss the location of taste buds.
- 4.8 Describe the changes in oral hard and soft tissues due to tooth extraction and/or denture wearing.
- 4.9 Describe the attachment of the epithelia to the basal bone.
- 4.10 Describe the age changes that occur in the periodontium, tissues of the teeth and tongue.

5.00 PERIODONTOLOGY

- 5.1 Identify and define correct periodontal terminology.
- 5.2 Classify periodontal disease.
- 5.3 Describe the basic etiology of periodontal disease.
- 5.4 Recognize and describe clinically healthy gingiva.
- 5.5 Differentiate between healthy gingiva and the early pathological manifestations of gingival disease.
- 5.6 Describe inflammatory and non-inflammatory conditions affecting the gingiva.
- 5.7 Describe HIV periodontal lesions such as atypical gingivitis and ANUG gingiva.
- 5.8 Describe candidiasis in the denture-wearing patient.
- 5.9 List common drugs that cause gingival enlargement.
- 5.10 Define and classify pockets.
- 5.11 Describe rapidly progressing periodontitis.
- 5.12 Recognize radiographic signs indicative of periodontal disease.
- 5.13 Relate occlusion to periodontal disease.
- 5.14 Distinguish between primary and secondary occlusal trauma.
- 5.15 Describe periodontosis or juvenile periodontitis.
- 5.16 Explain the process of recession.
- 5.17 Describe pericoronitis, periodontal abscesses and cysts.
- 5.18 List and describe four forms of periodontal therapy and discuss their use.
- 5.19 List and describe surgical periodontal procedures.

- 5.20 Describe synthetic bone grafts, citric acid technique and guided tissue regeneration (Gortex).
- 5.21 Discuss the goals of osseointegration and describe the most common implant system currently used.
- 5.22 (Duplicates 7.103)
- 5.23 List and describe the various periodontal diseases that directly affect the geriatric patient such as: desquamative gingivitis, burning mouth syndrome, denture sore mouth, xerostomia.
- 5.24 Explain the various oral physiotherapy aids that are currently available to patients.
- 5.25 Explain the use of chlorhexidine, Keyes technique, antitartar toothpastes, anti-plaque oral rinses and antibiotics in the control and elimination of periodontal disease.
- 5.26 List an appropriate oral regimen for patients receiving chemotherapy and radiation therapy.
- 5.27 Describe the drug-induced changes in the oral tissues by common drugs.
- 5.28 List representative drugs causing xerostomia and modes of treatment currently available to patients.
- 5.29 Recognize and record periodontal findings by performing an extra-oral, intra-oral examination.

6.00 MICROBIOLOGY & INFECTION CONTROL

Definitions

6.1 Describe the following microbes:

- 6.1.1 bacteria
- 6.1.2 viruses
- 6.1.3 fungi
- 6.1.4 rickettsia
- 6.1.5 chlamydia
- 6.1.6 protozoa

6.2 Define the terms "infection" and "spread of infection".

6.3 Define the term "chronic carrier" and describe the chronic carrier state.

6.4 Define the terms "cross infection & cross contamination".

6.5 (Duplicates 6.1)

Growth Requirements and Transmission

6.6 List the growth characteristics of bacteria

6.7 List and describe growth needs of other micro-organisms.

6.8 List and describe the factors that affect the death rate of microorganisms

6.9 State the potential routes of infection between the dental patient/client and the dental care provider.

Disease Characteristics and Symptoms

6.10 List and describe human air borne infectious disease characteristics.

6.11 List and describe food and water borne infectious disease characteristics.

6.12 List and describe soil-borne and arthropod-borne infectious disease characteristics.

6.13 List the major microorganism located on the:

- 6.13.1 tongue
- 6.13.2 gingival crevice
- 6.13.3 saliva
- 6.13.4 buccal mucosa
- 6.13.5 gingival mucosa

6.14 List and describe sexually transmitted and contact disease characteristics.

6.15 (Incorporated in 6.10-6.14 as amended)

6.16 (Incorporated in 6.10-6.14 as amended)

6.17 (Incorporated in 6.10-6.14 as amended)

6.18 (Incorporated in 6.10-6.14 as amended)

Resistance Factors of Microorganisms

6.19 List and describe non-specific resistance factors.

Defense Mechanisms

6.20 List and describe physical and chemical barriers to disease.

6.21 Define the term "phagocytosis" and describe the phagocytic process.

6.22 Define the term "inflammation" and describe the inflammatory response.

6.23 Define the term "fever" and describe its benefits and detriments.

6.24 Define the following terms:

- 6.24.1 immunity
- 6.24.2 active immunity
- 6.24.3 antigen
- 6.24.4 passive immunity

- 6.24.5 antibody
 - 6.24.6 adaptive immunity
 - 6.24.7 immune system
 - 6.24.8 cellular immunity
 - 6.24.9 humoral immunity
 - 6.24.10 innate immunity
 - 6.24.11 natural immunity
 - 6.24.12 artificial immunity
- 6.25 Describe the formation of B-lymphocytes.
 - 6.26 Describe the formation of T-lymphocytes.
 - 6.27 Define the term "immune tolerance".
 - 6.28 List the four types of hypersensitivity reactions and describe the process in each case.
 - 6.29 List the causes of immune deficiency diseases and their consequences.
 - 6.30 Define the term immune suppression and describe the process.
 - 6.31 Describe the action of "T4 cells" and "T8 cells".
 - 6.32 List individuals receiving prosthodontic treatment whose resistance to disease may be reduced.

Defense Mechanisms (Mechanical)

- 6.33 Define the following terms:
 - 6.33.1 disinfection
 - 6.33.2 sterilization
 - 6.33.3 antiseptics
 - 6.33.4 asepsis
 - 6.33.5 cidal agents
 - 6.33.6 static agents
 - 6.33.7 sanitization
 - 6.33.8 decontamination
 - 6.33.9 germicide
 - 6.33.10 cross-infection
 - 6.33.11 disinfectant

- 6.33.12 define superinfection and briefly explain its etiology and implications.
- 6.34 Discuss the susceptibility of the dentist to sources of infection.
- 6.35 Describe and demonstrate an effective hand washing routine.
(See also 14.16)
- 6.36 Identify the protective measures to prevent disease transmission (cross-infection).
- 6.37 List several components of a well-designed infection control procedure.
- 6.38 Describe the personal hygiene guide-lines that should be observed by all dental personnel.
- 6.39 (Duplicates 6.33)
- 6.40 Prepare instruments for sterilization and disinfection.
- 6.40.1 Demonstrate operator sanitization and disinfection, i.e., chair light.
- 6.41 Compare and contrast the five accepted methods of instrument sterilization.
- 6.42 Demonstrate the proper operation of the autoclave and dry-heat oven.
- 6.43 Describe the process of cold disinfection.
- 6.44 Discuss the choice and use of chemical disinfectant.
- 6.45 Identify advantages and disadvantages of various disinfecting agents in a dentist clinic.

Specific Diseases

- 6.46 For the hepatitis viral diseases:
- 6.46.1 Name the causative organism.
- 6.46.2 Describe the route(s) of transmission.
- 6.46.3 Describe the clinical symptoms and disease course.
- 6.46.4 Describe treatment and prevention modalities.
- 6.46.5 Discuss the immunology of hepatitis B and HIV infections and the health care workers. (Moved from 3.4.7).
- 6.47 Describe the oral manifestations of:

- 6.47.1 syphilis
- 6.47.2 gonorrhea
- 6.47.3 herpes simplex
- 6.47.4 tuberculosis (See also 6.62)
- 6.47.5 mumps
- 6.47.6 measles
- 6.47.7 rubella
- 6.47.8 chicken pox (varicella)
- 6.47.9 shingles (herpes zoster)
- 6.47.10 verrucae (warts)
- 6.47.11 candidiasis
- 6.47.12 rheumatic fever
- 6.47.13 scarlet fever
- 6.47.14 mononucleosis

6.48 For AIDS, list the:

- 6.48.1 causative organism
- 6.48.2 routes of transmission
- 6.48.3 clinical signs and symptoms (especially oral)
- 6.48.4 treatment and prevention modalities
- 6.48.5 describe high risk behaviors

6.49 For the herpes simplex viruses:

- 6.49.1 Name the causative organism.
- 6.49.2 Describe the routes of transmission.
- 6.49.3 Describe the clinical symptoms and disease course
- 6.49.4 Describe treatment and prevention modalities

Dental Prosthesis

- 6.50 Describe an appropriate aseptic procedure to follow when transporting dental prostheses.
- 6.51 Discuss the legal implications of following the recommended OSHA Infection Control Guide-lines to the dentist.
- 6.52 Describe the Health and Safety Standards regarding bloodborne pathogens.

- 6.53 Identify the key components of Material Safety Data Sheets (MSDS).
(See also 16.8)
- 6.54 Describe the recommended procedure regarding contaminated material disposal.
- 6.55 Discuss the components of a quality assurance program as it relates to monitoring devices.
- 6.56 Collect and incubate microbial samples from different parts of the clinic to evaluate the success of contamination control practices in the dentist clinic.
- 6.57 Observe and report on aseptic procedure in another dental clinic.
- 6.58 Make a specific list of items in the student's instrument kit and determine how each item would best be sterilized and/or disinfected.
- 6.60 (Text deleted)
- 6.61 (Text deleted)
- 6.62 Briefly describe tuberculosis under the following headings:
- 6.62.1 etiology
 - 6.62.2 pre-disposing factors
 - 6.62.3 pathophysiology
 - 6.62.4 manifestations and complications including drug resistance
 - 6.62.5 therapeutic interventions
 - 6.62.6 prevention

7.00 PATHOPHYSIOLOGY (MEDICINE) (Items marded by * are outside the scope of practice in Oregon, but are recommended as training related to dental health and community standards.)

Part I: General Pathology

Definitions

7.1 Define the following terms:

- 7.1.1 disease
- 7.1.2 pathology
- 7.1.3 pathogenesis
- 7.1.4 etiology
- 7.1.5 lesion
- 7.1.6 sign
- 7.1.7 symptom
- 7.1.8 ulcer (ulceration)
- 7.1.9 vesicle
- 7.1.10 laceration
- 7.1.11 bullae (bullous)
- 7.1.12 syndrome
- 7.1.13 diagnosis
- 7.1.14 prognosis
- 7.1.15 petechiae
- 7.1.16 erythematous

Etiology of Disease

7.2 Identify the general causes of disease, including several examples of each:

- 7.2.1 genetic or hereditary diseases.
- 7.2.2 congenital anomalies
- 7.2.3 trauma (mechanical, physical)
- 7.2.4 chemicals
- 7.2.5 infectious diseases
- 7.2.6 alterations in immunity and inflammation
 - 7.2.6.1 hypersensitivity
 - 7.2.6.2 immunodeficiency
- 7.2.7 hypoxia

- 7.2.8 nutritional diseases (See 22.7.1.3)
- 7.2.9 neoplasia
- 7.2.10 psychogenic disease (psychosomatic)
- 7.2.11 iatrogenic disease
- 7.2.12 idiopathic disease

Cellular Adaptation to Injury

7.3 Define, list the causes of and give an example of each of the following cellular adaptations to injury:

- 7.3.1 atrophy
- 7.3.2 hypertrophy
- 7.3.3 hyperplasia
- 7.3.4 metaplasia
- 7.3.5 dysplasia
- 7.3.6 neoplasia
- 7.3.7 necrosis

Fluids Imbalances

7.4 Describe dehydration under the following headings:

- 7.4.1 causes
- 7.4.2 manifestations, including oral
- 7.4.3 therapeutic interventions
- 7.4.4 clinical implications

7.5 Describe edema under the following headings:

- 7.5.1 types
- 7.5.2 causes
- 7.5.3 manifestations including oral
- 7.5.4 therapeutic interventions, including diuretics
- 7.5.5 clinical implications

7.6 Briefly discuss the correlation between fluid imbalances and electrolyte imbalances.

Inflammation

- 7.7 Define inflammation.
- 7.8 Identify the causes of an inflammatory response.
- 7.9 List several purposes of inflammation.
- 7.10 List the cardinal signs of inflammation.
- 7.11. Briefly explain what is meant by the term chemical mediators.
- 7.12 Identify and briefly describe the events involved in each of the following:
 - 7.12.1 vascular response
 - 7.12.2 cellular response
- 7.13 Define the following terms:
 - 7.13.1 hyperemia
 - 7.13.2 exudation
 - 7.13.3 purulent
 - 7.13.4 abscess
 - 7.13.5 pyrexia
 - 7.13.6 leukocytosis
 - 7.13.7 cyst
 - 7.13.8 fistula
- 7.14 List several systemic manifestations of inflammation.
- 7.15 Compare and contrast acute and chronic inflammations under the following headings:
 - 7.15.1 causative agents
 - 7.15.2 onset of response
 - 7.15.3 cells involved
 - 7.15.4 intensity of response
 - 7.15.5 duration
 - 7.15.6 outcome
- 7.16 Identify general therapeutic interventions used in the treatment of inflammation.

- 7.17 (Moved to 12.5.9)
- 7.18 (Moved to 12.5.10)
- 7.19 Differentiate between regeneration and repair.
- 7.20 Identify several factors which influence wound healing either positively and negatively.
- 7.21 Briefly describe repair of a simple wound.
- 7.22 Describe some therapeutic interventions which might be used to promote healing.
- 7.23 List groups of drugs which impair healing.

Immunity and Related Disorders (See also 6.20-6.32)

- 7.24 (Duplicates 7.20)
- 7.25 (Duplicates 7.21)
- 7.26 (Duplicates 7.22)
- 7.27 (Duplicates 7.23)
- 7.28 Define the following terms:
 - 7.28.1 immunity
 - 7.28.2 antigen
 - 7.28.3 antibody
 - 7.28.4 hypersensitivity
- 7.29 Identify 3 characteristics of an immune response.
- 7.30 Briefly describe how immune cells can differentiate between host cells and antigen.
- 7.31 Identify the 3 types of cells involved in immunity and the roles of each.

7.32 Briefly describe the events of:

- 7.32.1 cellular immunity
- 7.32.2 humoral immunity

7.33 Briefly describe events of:

- 7.33.1 active immunity
- 7.33.2 passive immunity

7.34 Explain how active and passive immunity are acquired.

7.35 Identify the advantages and disadvantages of both active and passive immunity.

7.36 Define autoimmune disease.

7.37 Identify a drug group which suppresses immunity.

7.38 (Moved to 6.48)

Genetic Diseases

7.39 Identify the categories of genetic disease, including the general characteristics and examples of the following:

- 7.39.1 mutations
- 7.39.2 autosomal dominant disorders.
- 7.39.3 autosomal recessive disorders
- 7.39.4 sex-linked disorders
- 7.39.5 alterations in chromosomal number

Neoplasia

7.40 Briefly identify the general rules used in naming tumors.

7.41 Differentiate between benign and malignant growths.

7.42 Define the following terms:

- 7.42.1 anaplasia
- 7.42.2 infiltration
- 7.42.3 metastasis
- 7.42.4 carcinogenesis
- 7.42.5 carcinogen
- 7.42.6 oncology
- 7.42.7 oncogenic
- 7.42.8 primary cancer
- 7.42.9 secondary (metastatic cancer)

7.43 Identify several carcinogens associated with a denturist practice and include an example of each.

7.44 Identify several factors which pre-dispose to the development of cancer.

7.45 (Text deleted)

7.46 List the 7 warning signs of cancer.

7.47 Identify how surgery is used in the treatment of cancer.

7.48 Briefly describe radiation therapy under the following headings:
(See also 7.118-7.120)

- 7.48.1 action
- 7.48.2 adverse effects
- 7.48.3 oral effects

7.49 Briefly describe chemotherapy under the following headings:

- 7.49.1 mechanism of action
- 7.49.2 effects
- 7.49.3 adverse effects
- 7.49.4 oral manifestations

7.50 (Moved to 12.4.3)

7.51 (Text deleted)

7.52 Briefly describe leukemia under the following headings:

- 7.52.1 characteristics
- 7.52.2 manifestations
- 7.52.3 therapeutic interventions

7.53 Briefly describe Hodgkin's disease under the following headings:

- 7.53.1 characteristics
- 7.53.2 manifestations
- 7.53.3 therapeutic interventions

7.54 (Duplicates 6.46)

7.55 (Moved to 6.47)

Diseases Affecting the Cardiovascular System

7.56 Define anemia

7.57 List the general manifestations of anemia.

7.58 Identify several types of anemia including cause, specific manifestations and therapeutic interventions for each.

7.59 Briefly describe thrombocytopenia under the following headings:

- 7.59.1 etiology
- 7.59.2 manifestations
- 7.59.3 therapeutic interventions

7.60 Define the following terms;

- 7.60.1 hypercoagulability
- 7.60.2 thrombosis

7.61 Identify several factors which contribute to inappropriate clotting.

7.62 List several conditions associated with hypercoagulability.

7.63 Identify the drug groups used in the treatment of hypercoagulability and describe each under the following headings:

- 7.63.1 action and effects
 - 7.63.2 examples
 - 7.63.3 adverse effects
- 7.64 Define a thrombus.
- 7.65 Briefly describe thrombophlebitis under the following headings:
- 7.65.1 etiology
 - 7.65.2 pathophysiology
 - 7.65.3 therapeutic interventions
- 7.66 Define the following terms:
- 7.66.1 arteriosclerosis
 - 7.66.2 atherosclerosis
 - 7.66.3 hyperlipidemia
 - 7.66.4 atherosclerotic plaque
 - 7.66.5 infarction
 - 7.66.6 aneurysm
 - 7.66.7 antilipemic
 - 7.66.8 embolism
- 7.67 List the factors which predispose an individual to atherosclerosis indicating which are the most significant.
- 7.68 Briefly describe the atherosclerotic plaque and its significance.
- 7.69 List several therapeutic interventions used in the treatment of atherosclerosis.
- 7.70 Define the following terms:
- 7.70.1 hypertension
 - 7.70.2 essential hypertension
 - 7.70.3 cardiomegaly
 - 7.70.4 proteinuria
 - 7.70.5 hematuria
 - 7.70.6 uremia
 - 7.70.7 vertigo
 - 7.70.8 tinnitus
 - 7.70.9 epistaxis

7.70.10 syncope

- 7.71 Identify the numerical definition of hypertension.
- 7.72 List factors which predispose an individual to hypertension.
- 7.73 Briefly identify possible causes of hypertension
- 7.74 Identify the main organs or structures which are affected the most significantly by hypertension and what these effects are.
- 7.75 List common manifestations of hypertension.
- 7.76 Identify several modalities used in the treatment of hypertension.
- 7.77 (Moved to 12.5.1)
- 7.78 Define angina pectoris.
- 7.79 Identify the conditions which are responsible for angina pectoris.
- 7.80 Identify the basic pathophysiology involved in angina.
- 7.81 Describe anginal pain, including what might precipitate its onset.
- 7.82 Identify non-pharmalogic interventions, including surgical modalities, used in the treatment of angina.
- 7.83 Identify the types of drugs used in the treatment of angina.
- 7.84 Briefly describe nitroglycerin under the following headings:
 - 7.84.1 action and effects
 - 7.84.2 uses
 - 7.84.3 adverse effects
- 7.85 Define myocardial infarction.
- 7.86 Briefly describe myocardial infarction under the following headings:
 - 7.86.1 pathophysiology
 - 7.86.2 manifestations

- 7.86.3 complications
- 7.86.4 therapeutic goals and interventions
- 7.86.5 prognosis

- 7.87 Define congestive heart failure.

- 7.88 Identify the general causes of heart failure.

- 7.89 Briefly describe both left-sided and right-sided heart failure under the following headings:
 - 7.89.1 pathophysiology
 - 7.89.2 manifestations

- 7.90 (Moved to 12.5.4)

- 7.91 (Moved to 12.5.3)

- 7.92 Define cerebrovascular accident (CVA).

- 7.93 Briefly describe cerebrovascular accident under the following headings:
 - 7.93.1 etiology
 - 7.93.2 pathophysiology
 - 7.93.3 manifestations
 - 7.93.4 therapeutic interventions
 - 7.93.5 prognosis

- 7.94 Briefly describe the heart complications associated with rheumatic fever including the:
 - 7.94.1 typical lesion
 - 7.94.2 pre-disposition to endocarditis
 - 7.94.3 course of endocarditis
 - 7.94.4 implications for dental professionals

- 7.95 (Moved to 6.33.12)

Respiratory Diseases

- 7.96 Define the following terms:

- 7.96.1 chronic obstructive pulmonary disease
- 7.96.2 asthma
- 7.96.3 emphysema
- 7.96.4 chronic bronchitis

7.97 Briefly describe asthma under the following headings:

- 7.97.1 causative factors
- 7.97.2 factors which may precipitate an attack
- 7.97.3 pathophysiology
- 7.97.4 manifestations
- 7.97.5 therapeutic interventions

7.98 (Moved to 12.5)

7.99 Briefly describe emphysema under the following headings:

- 7.99.1 etiology
- 7.99.2 pathophysiology
- 7.99.3 manifestations and complications
- 7.99.4 therapeutic interventions

7.100 Briefly describe chronic bronchitis under the following headings:

- 7.100.1 etiology
- 7.100.2 pathophysiology
- 7.100.3 manifestations and complications
- 7.100.4 therapeutic interventions

7.101 (Moved to 6.62)

Endocrine Diseases

7.102 Define the following terms:

- 7.102.1 diabetes mellitus
- 7.102.2 hyperglycemia
- 7.102.3 glycosuria
- 7.102.4 ketonuria
- 7.102.5 ketoacidosis

- 7.102.6 polyuria
- 7.102.7 polydipsia
- 7.102.8 polyphagia
- 7.102.9 pruritus
- 7.102.10 neuropathy
- 7.102.11 nephropathy
- 7.102.12 proteinuria
- 7.102.13 retinopathy

7.103 Briefly describe diabetes mellitus under the following headings:

- 7.103.1 incidence
- 7.103.2 pre-disposing factors
- 7.103.3 types
- 7.103.4 etiology
- 7.103.5 pathophysiology
- 7.103.6 manifestations
- 7.103.7 acute complications
- 7.103.8 chronic complications
- 7.103.9 therapeutic interventions

7.104 Briefly describe the following endocrine problems, including the etiology, manifestations, therapeutic interventions and dental implications of each:

- 7.104.1 Cushing's disease
- 7.104.2 Addison's disease
- 7.104.3 hypothyroidism
- 7.104.4 hyperthyroidism
- 7.104.5 acromegaly

Musculoskeletal Disorders

7.105 Briefly describe osteoporosis under the following headings:

- 7.105.1 definition
- 7.105.2 pre-disposing factors
- 7.105.3 pathophysiology
- 7.105.4 manifestations and complications
- 7.105.5 therapeutic intervention
- 7.105.6 dental complications

7.106 Define each of the following terms:

- 7.106.1 arthritis
- 7.106.2 osteoarthritis
- 7.106.3 rheumatoid arthritis
- 7.106.4 (Unknown term)
- 7.106.5 subluxation
- 7.106.6 crepitus
- 7.106.7 ankylosis

7.107 Describe osteoarthritis under the following headings:

- 7.107.1 etiology
- 7.107.2 pre-disposing factors
- 7.107.3 pathophysiology
- 7.107.4 joints involved
- 7.107.5 manifestations, including oral
- 7.107.6 therapeutic interventions

7.108 Describe rheumatoid arthritis under the following headings:

- 7.108.1 etiology
- 7.108.2 pathophysiology
- 7.108.3 joints involved
- 7.108.4 manifestations - intra-articular, including oral - extra-articular
- 7.108.5 therapeutic interventions

Neurological Disorders

7.109 Define epilepsy

7.110 Identify medications used to treat epilepsy

7.111 Briefly describe the oral manifestations of the drug phenytoin (Dilantin)

7.112 Identify the appropriate emergency care for an epileptic seizures.

Part II: Oral Pathology

7.113 Describe the histological features, clinical significance and therapeutic interventions for each of the following.

- 7.113.1 angular cheilitis
- 7.113.2 leukoplakia
- 7.113.3 thrush (moniliasis)
- 7.113.4 actinomycosis
- 7.113.5 (Duplicates 6.49)
- 7.113.6 lichen planus
- 7.113.7 aphthous ulcers (RAU)

Odontogenic Cysts and Tumors

7.114 Discuss the odontogenic cysts and tumors which may develop in the head and neck region and describe their consequence to prosthodontic therapeutic interventions.

7.114.1 Describe the etiology, clinical features, radiographic appearance, treatment and complications of primordial, dentigerous, apical periodontal and lateral periodontal cysts.

7.114.2 Describe the etiology and clinical features of the following cysts:

- 7.114.2.1 dental lamina cyst of the newborn
- 7.114.2.2 gingival cyst of the adult
- 7.114.2.3 odontogenic keratocyst
- 7.114.2.4 calcifying odontogenic cyst

7.114.3 Describe the etiology and clinical features of the following tumors:

- 7.114.3.1 ectodermal tumors - enameloma and ameloblastoma
- 7.114.3.2 mesodermal tumors - cementoma
- 7.114.3.3 mixed tissue tumors - odontoma and teratoma

7.115 Describe the general characteristics, clinical features, treatment and prognosis of the following benign tumors of epithelial origin:

- 7.115.1 papilloma
- 7.115.2 pigmented cell nevus

7.116 Discuss the etiology, clinical features, histology, malignant potential, treatment and differential diagnosis of leukoplakia.

7.117 Describe the clinical features, histology and clinical significance of leukodema.

7.118 Describe the general characteristics, etiology, clinical features, histology, treatment, prognosis and complications of malignant tumors of epithelial origin.

7.118.1 basal cell carcinoma

7.118.2 squamous cell carcinoma of the lip, tongue, buccal mucosa, gingiva and floor of the mouth.

7.118.3 malignant melanoma

7.118.4 adenocarcinoma

7.119 Describe the general characteristics, etiology, clinical features, histology, treatment, prognosis and complications of malignant tumors of mesenchymal origin.

7.119.1 fibrosarcoma

7.119.2 Kaposi's sarcoma

7.119.3 osteosarcoma

7.119.4 Hodgkin's disease

7.119.5 multiple myeloma

7.120 Describe the general characteristics, etiology, clinical features, treatment and prognosis of the following benign tumors of mesenchymal origin: (See also 7.40-7.53)

7.120.1 fibroma

7.120.2 peripheral giant cell granuloma

7.120.3 lipoma

7.120.4 hemangioma

7.120.5 lymphangioma

7.120.6 myxoma

7.120.7 chondroma

7.120.8 osteoma

7.120.9 traumatic neuroma (amputation neuroma)

7.120.10 neurofibroma

Oral Manifestations of Chemical and Physical Injuries

7.121 Describe the etiology and clinical features of the following physical injuries

- 7.121.1 bruxism
- 7.121.2 fracture of the teeth
- 7.121.3 traumatic cyst and ulcer
- 7.121.4 focal osteoporosis
- 7.121.5 effects of orthodontic movement
- 7.121.6 traumatic ulcer (denture ulcer)
- 7.121.7 factitial injuries (self-inflicted injuries)

- 7.121.7a attrition
- 7.121.7b abrasion
- 7.171.7c erosion

7.121.8 denture injuries

- 7.121.8a papillomatosis (papillary hyperplasia)
- 7.121.8b epulis fissuratum (fibroid epulis)
- 7.121.8c epulis granulomatosis

7.121.9 perleche

- 7.121.10 mucous retention cyst
- 7.121.11 ranula
- 7.121.12 sialolithiasis
- 7.121.13 radiation burn
- 7.121.14 hematoma

7.122 Describe the clinical features and treatment for the following chemical injuries to the oral cavity.

- 7.122.1 aspirin burn
- 7.122.2 sodium perborate burn
- 7.122.3 dilantin hyperplasia
- 7.122.4 tetracycline staining
- 7.122.5 antineoplastic agent reaction

7.123 Describe the clinical features and treatment for the following allergic reactions.

- 7.123.1 angioneurotic edema
- 7.123.2 drug allergy
- 7.123.3 contact stomatitis

- 7.123.3a denture sore mouth
- 7.123.3b denture stomatitis

Temporomandibular Joint

7.124 Discuss the etiology, clinical features, characteristics and treatment of the following temporomandibular joint pathologies:

- 7.124.1 Subluxation
- 7.124.2 TMJ pain - dysfunction syndrome
- 7.124.3 Infectious arthritis
- 7.124.4 (Duplicates 7.107)
- 7.124.5 Rheumatoid Arthritis

7.125 Discuss developmental anomalies and neoplasms of the temporomandibular joint.

Developmental Conditions

7.126 Describe the etiology, pathology and clinical consequences of the following pathologies related to developmental disturbances of the jaws and face:

- 7.126.1 Tori
- 7.126.2 (Duplicates 4.1.3)
- 7.126.3 Macroglossia
- 7.126.4 Macrognathia
- 7.126.5 Fordyce's granules
- 7.126.6 Facial hemihypertrophy
- 7.126.7 Facial hemiatrophy
- 7.126.8 Fibromatosis gingivae
- 7.126.9 Exostosis

7.127 Describe the etiology, clinical manifestation and treatment for each pathology related to developmental disturbances of the teeth.

- 7.127.1 Size
- 7.127.2 Shape
- 7.127.3 Number
- 7.127.4 Structure

- 7.127.5 Eruption
- 7.127.6 Regressive alteration

7.128 Identify the position, clinical manifestations and clinical significance of each of the following developmental cysts in the oral cavity.

- 7.128.1 Median anterior maxillary cyst
- 7.128.2 Median palatal cyst
- 7.128.3 Globomaxillary cyst
- 7.128.4 Median mandibular cyst
- 7.128.5 Nasoalveolar cyst
- 7.128.6 Palatal cyst of the newborn
- 7.128.7 Thyroglossal tract cyst
- 7.128.8 Dermoid cyst

Conditions of the Tongue

7.129 Describe the etiology, clinical characteristics and therapy for pathology related to developmental disturbances of the tongue and salivary glands:

- 7.129.1 Median rhomboid glossitis
- 7.129.2 Ankyloglossia
- 7.129.3 Coated tongue
- 7.129.4 Fissured tongue
- 7.129.5 Lingual tonsil
- 7.129.6 Geographic tongue (migratory glossitis)
- 7.129.7 Black hairy tongue (lingua nigra)
- 7.129.8 White hairy tongue (lingua villosa alba)
- 7.129.9 Aplasia
- 7.129.10 Xerostomia
- 7.129.11 Atresia
- 7.129.12 Aberrancy

Dental Caries and Pulpal Diseases

7.130 Identify the various deposits found on the dentition and relate the pathologic processes that are initiated by these deposits.

- 7.131 Describe the etiology, incidence, clinical features, treatment and prognosis of dental caries.
- 7.132 Describe the etiology, incidence, clinical features, treatment and prognosis of gingivitis, acute necrotizing ulcerative gingivitis, and periodontitis.
- 7.133 Describe the etiology, incidence, clinical features, treatment and prognosis of gingival hyperplasia.
- 7.134 Define pulpitis and describe the conditions which account for the wide variability in pulpal response to injury among different patients.

*7.135 Characterize each of the following disturbances (diseases) of pulp:

- *7.135.1 hyperemia of pulpitis
- *7.135.2 suppurative pulpitis
- *7.135.3 ulcerative pulpitis
- *7.135.4 internal resorption (idiopathic resorption)
- *7.135.5 simple pulpitis
- *7.135.6 gangrenous pulpitis
- *7.135.7 chronic productive pulpitis (hyperplastic pulpitis)

*7.136 Associate each of the following symptoms with one of the diseases listed in 7.135 above and describe the symptom:

- *7.136.1 pulp polyp (granulation tissue)
- *7.136.2 pink tooth of Mummy
- *7.136.3 ischemia

*7.137 Characterize each of the following sequelae to pulpitis:

- *7.137.1 periapical abscess (central abscess)
- *7.137.2 periodontal abscess (lateral abscess)
- *7.137.3 cellulitis

8.00 RADIOGRAPHIC PATTERN RECOGNITION (Items marked by * are outside the scope of practice in Oregon, but are recommended as training related to dental health and care and community standards.)

Radiography in Dental Practice

- *8.1 Specify the uses of radiographs in dental treatment.
- 8.2 List the legal/ethical accountabilities and responsibilities of each member of the dental team as these relate to dental radiography.
- 8.3 Define the following terms:
 - *8.3.1 radiography, radiographer
 - *8.3.2 radiology, radiologist
 - *8.3.3 x-ray radiation
 - 8.3.4 Radiographic film (x-rays, radiograph, radiogram, intra-oral films and extra-oral films)
- 8.4 Describe the history and development of radiology.

Characteristics of Radiation

- 8.5 List and explain the physical characteristics of x-ray radiation.
- 8.6 Define the following terms:
 - 8.6.1 primary radiation
 - 8.6.2 secondary radiation
 - 8.6.3 scatter radiation
 - 8.6.4 primary beam
 - 8.6.5 whole body radiation
- 8.7 Identify the terms used to measure radiation.

Technical Aspects of Radiation Production

- *8.8 Define the following terms:
 - *8.8.1 latent image
 - *8.8.2 visible image
 - 8.8.3 radiopacity

Dental X-ray Films

- 8.9 Describe the common types of intra-oral and extra-oral radiographic films and list their functions.
- 8.10 Identify common artifacts that affect dental radiographic film and describe their abnormal appearance.

Mounting Radiographs for Identification

- *8.11 Demonstrate the procedure and system of mounting dental radiographs.
- 8.12 Explain the purpose of the embossed dot on radiographic films.

Radiographic Interpretation - Teeth and Periodontium

- 8.13 List and identify in dental radiographs the following:
 - 8.13.1 Visible characteristics of individual teeth of the primary or permanent dentition (e.g. shape of crowns, number of roots, etc).
 - 8.13.2 The anatomical structures of the tooth:
 - 8.13.2.1 enamel
 - 8.13.2.2 dentin
 - 8.13.2.3 cementum
 - 8.13.2.4 pulp chamber and pulp canal(s)
 - 8.13.3 The anatomical structures of the periodontium:
 - 8.13.3.1 alveolar bone
 - 8.13.3.1.1 cortical bone (lamina dura)
 - 8.13.3.1.2 cancellous bone (spongy bone)
 - 8.13.3.1.3 alveolar crest
 - 8.13.3.2 periodontal membrane space
 - 8.13.3.3 gingiva

***Radiographic Interpretation - Anatomical Structures of the Head**

*8.14 List and identify in dental radiographs the following:

- *8.14.1 incisive canal foramen (anterior palatine foramen)
- *8.14.2 median palatine suture
- *8.14.3 nasal fossae
- *8.14.4 nasal septum
- *8.14.5 maxillary sinus
- *8.14.6 inverted "typical Y"
- *8.14.7 zygomatic bone (malar bone)
- *8.14.8 zygomatic arch
- *8.14.9 maxillary tuberosity
- *8.14.10 hamular process
- *8.14.11 coronoid process
- *8.14.12 genial tubercles
- *8.14.13 lingual foramen
- *8.14.14 mental foramen
- *8.14.15 mylohyoid ridge (internal oblique ridge)
- *8.14.16 inferior border of the mandible
- *8.14.17 external oblique ridge
- *8.14.18 mandibular canal and other nutrient canals
- *8.14.19 ascending border of the ramus
- *8.14.20 mental process or ridge
- *8.14.21 temporomandibular joint

***Radiographic Interpretation - General**

*8.15 Identify the following structures in dental radiographs:

- *8.15.1 metallic restorations
- *8.15.2 calculus
- *8.15.3 caries (incipient, advanced, recurrent occlusal)
- *8.15.4 overhang
- *8.15.5 abscessed teeth

- *8.15.6 impacted teeth
- *8.15.8 retained roots
- *8.15.8 bone loss
- *8.15.9 resorption (crestal bone loss)
- *8.15.10 root resorption
- *8.15.11 bifurcation
- *8.15.12 internal resorption
- *8.15.13 condensing osteitis
- *8.15.14 pulp stone
- *8.15.15 hypercementosis
- *8.15.16 dilacerated roots
- *8.15.17 supernumerary teeth
- *8.15.18 mesiodens
- *8.15.19 gutta percha
- *8.15.20 silver points
- *8.15.21 restorations - acrylic composite
silicate
- *8.15.22 space maintainer

*Radiographic Interpretation - Cysts

*8.16 Describe the dental radiographic appearance of:

*8.16.1 odontogenic cysts

- *8.16.1.1 radicular cysts
- *8.16.1.2 dentigerous cysts
- *8.16.1.3 residual cysts
- *8.16.1.4 kerato cysts
- *8.16.1.5 primordial cysts

*8.16.2 nondontogenic cysts

- *8.16.2.1 nasopalatine cysts
- *8.16.2.2 median palatine
cysts
- *8.16.2.3 nasoalveolar cysts
- *8.16.2.4 dermoid cysts

*Radiographic Interpretation - Hyperplasia

*8.17 Describe the dental radiographic appearance of the following hyperplasias:

- *8.17.1 torus palatinus
- *8.17.2 torus mandibularis
- *8.17.3 exostosis
- *8.17.4 enostosis

*Radiographic Interpretation - Tumors

*8.18 Describe the dental radiographic appearance of odontogenic tumors:

*8.18.1 ectodermal tumors

*8.18.1.1 ameloblastoma

*8.18.2 mixed tumors (ectodermal-mesodermal)

*8.18.2.1 odontoma

*8.18.2.2 ameloblastic fibroma

*8.18.3 mesodermal tumors

*8.18.3.1 dentinoma

*8.19 Describe the dental radiographic appearance of nonodontogenic tumors:

*8.19.1 ectodermal

*8.19.1.1 neuroma

*8.19.2 mixed tumors (ectodermal-mesodermal)

*8.19.2.1 neurofibroma

*8.19.2.2 mesodermal tumors

*8.19.2.2.1 osteoma

*8.19.2.2.2 central hemangioma

*8.19.2.2.3 osteoblastoma

*Radiographic Interpretation - Malignant Lesions

*8.20 Describe the radiographic characteristics and appearance of malignant lesions:

*8.20.1 Carcinomas

- *8.20.1.1 squamous cell carcinoma
- *8.20.1.2 metastatic carcinoma

*8.20.2 Sarcomas

- *8.20.2.1 osteosarcoma
- *8.20.2.2 chondrosarcoma
- *8.20.2.3 fibrosarcoma

9.00 BIOMECHANICS (DENTAL KINESIOLOGY)

- 9.1 Explain the relationship between kinesiology and prosthodontic care.
- 9.2 List and describe the normal functions of the oral/facial muscles of mastication.
- 9.3 Identify all forces affecting denture prostheses during muscle functions.
- 9.4 List and describe the normal functions of the temporomandibular joint.
- 9.5 Identify the forces generated on the denture prostheses during temporomandibular joint excursions.
- 9.6 Describe the functional force relationships between teeth and the prosthetic appliance.
- 9.7 Describe and explain the dynamic relationship between functional occlusion and prosthetic design.
- 9.8 List and describe oral hard and soft tissue adaptive processes following prosthodontic appliance insertion.

10.00 DENTAL PSYCHOLOGY

Theories

- 10.1 Discuss appropriate psychology theories relating to oral health care.
- 10.2 Describe common theories of hunger as they relate to eating disorders, satiety, hunger and thirst.

Basic Functions

- 10.3 Describe the three basic functions of the oral cavity and their importance to the individual from a psychological perspective.
- 10.4 Describe the anatomical and physiological structures involved in taste and smell.

Pain and TMJ Dysfunction

- 10.5 Describe the elements involved in the transmission of pain.
- 10.6 Discuss the emotional and cultural factors mediating pain.
- 10.7 Describe the psychological implications related to TMJ dysfunction.

Patient Expectations

- 10.8 Describe patient expectations and reactions related to prosthetics.
- 10.9 Determine the expectations of the denture patient/client related to oral rehabilitation.

Communication

- 10.10 Define and demonstrate verbal and non-verbal communication.
- 10.11 Identify patient types in relation to communication theory and describe the potential problems.

Patient Management and Behavior Modification

- 10.12 Define hypnosis and relaxation techniques in patient management.
- 10.13 Discuss patient and practitioner stress and phobias related to dental care.
- 10.14 List several factors accounting for stress and phobias in the patient.
- 10.15 Describe techniques of behavior modification.
- 10.16 Discuss the psychological effects of sexually abused patients.
(moved/edited from 20.15)

11.00 DENTAL PSYCHOLOGY AND THE AGING PROCESS

- 11.1 Differentiate among the following terms:
 - 11.1.1 Gerontology
 - 11.1.2 Aging
 - 11.1.3 Geriatrics
 - 11.1.4 Gerodontology
- 11.2 Describe the current demographic trends of the aging population.
 - 11.2.1 Demographic trends in aging
- 11.3 Discuss the importance of attitudes toward aging.
 - 11.3.1 Myths and realities of aging
- 11.4 Describe the psychological significance of tooth loss.
- 11.5 Discuss theories of aging.
- 11.6 Discuss the effects of aging on intelligence and memory.
- 11.7 Discuss the physical characteristics of aging.
 - 11.7.1 Physical health changes/health problems
- 11.8 Discuss the characteristics of the retired person.
 - 11.8.1 Life Adjustments and Transitions in the Older Years:
 - 11.8.1.1 Retirement
 - 11.8.1.2 Changes in relationships
 - 11.8.1.3 Social isolation/loneliness
 - 11.8.1.4 Dealing with death, widowhood and loss
 - 11.8.1.5 Changes in role
 - 11.8.1.6 Changes in financial state

- 11.9 Describe common psychological disorders of the elderly and their underlying causes.
 - 11.9.1 Mental and emotional problems in senior years
 - 11.9.1.1 Depression, anxiety, sleep disturbances, etc.
 - 11.9.1.2 Drug and alcohol problems among seniors.
- 11.10 Differentiate between normal aging and disease conditions.
- 11.11 Describe the special health needs of the institutionalized and disabled elderly person.
- 11.12 Demonstrate an understanding of how to utilize the senior services system.
- 11.13 Demonstrate an understanding of major policy issues affecting seniors
 - 11.13.1 Health care
 - 11.13.2 Insurance
 - 11.13.3 Housing
 - 11.13.4 Transportation
 - 11.13.5 Taxation

12.00PHARMACOLOGY

- 12.1 (Moved to 23.2)
- 12.2 (Moved to 23.3)
- 12.3 Be familiar with the laws governing prescription drugs and use.
- 12.4 Describe the actions, reactions, indications, side effects and implications (particularly oral) of the following drug groups as they relate to the practice of denture technology:
 - 12.4.1 antimicrobials
 - 12.4.2 autonomic nervous system drugs
 - 12.4.3 central nervous drugs, including anesthetics, analgesics, sedatives, antidepressants, hormone regulation and anticonvulsants.
- 12.5 Identify the actions, indications and how each of the following drug types may complicate a denturist's treatment.
 - 12.5.1 antihypertensives
 - 12.5.2 anticoagulants & platelet inhibitors
 - 12.5.3 cardiotonics
 - 12.5.4 antiarrhythmics
 - 12.5.5 bronchodilators
 - 12.5.5.1 mechanism of action and effect
 - 12.5.5.2 route(s) of administration
 - 12.5.5.3 examples
 - 12.5.5.4 adverse effects
 - 12.5.6 corticosteroids
 - 12.5.6.1 mechanism of action and effect
 - 12.5.6.2 route(s) of administration
 - 12.5.6.3 examples
 - 12.5.6.4 adverse effects
 - 12.5.7 immunosuppressants
 - 12.5.8 antineoplastics

12.5.9 describe the oral implications of non-steroidal anti-inflammatory drugs for the dentist

12.5.10 describe the oral implications of steroidal anti-inflammatory drugs for the dentist

12.6 (Moved to 23.4)

12.7 (Moved to 23.1)

13.00 PRE-CLINICAL PROSTHETICS

Equipment and Materials

- 13.1 Identify the safe use of laboratory and clinical equipment, instruments and materials used in denture construction.
- 13.2 Demonstrate methods of maintaining the equipment and materials utilized in the construction of removable dentures.
- 13.3 Describe the characteristics of impression materials in terms of use, equipment needed and manipulation requirements.

Laboratory Procedures

- 13.4 Correctly box/bead, final impressions and pour and trim casts.
- 13.5 Fabricate custom impression trays utilizing various methods.
- 13.6 Construct baseplates and occlusal rims, to given measurements.
- 13.7 Construct record bases esthetic occlusal trim to be used for the registration of interocclusal records utilizing a pintracing device. Articulate master casts utilizing a facebow transfer, conventional registration records and/or intraoral tracing devices.
- 13.8 Arrange artificial teeth according to arch configuration.
- 13.9 Set-up various types of artificial teeth to achieve proper articulation and balanced occlusion with anatomical teeth.
- 13.10 Describe the components, use and assemble a pin tracing device.
- 13.11 Wax-up to correct aesthetic standard, flask, process, and deflask complete dentures utilizing various techniques.
- 13.12 Remount and equilibrate maxillary and mandibular dentures.

13.13 Demonstrate proper contouring and finishing techniques when trimming and polishing dentures.

13.14 Reline, rebase and repair dentures.

Impression Trays, Jaw Relations, and Artificial Teeth

13.15 Select suitable stock trays for preliminary impression making.

13.16 Describe and demonstrate the use of the facebow transfer to an articulator.

13.17 Select teeth to satisfy aesthetic and functional requirements of different cases and arch configurations.

13.18 Describe the advantages and disadvantages of various types of artificial teeth and their applications.

13.19 Register eccentric jaw relations and adjust a semi-adjustable articulator to correspond to a given record.

The Edentulous State and Biomechanics

- 14.1 Define the edentulous state and list the procedures involved in complete denture construction.
- 14.2 Describe patient adaptive responses of hard and soft tissues to complete dentures.
- 14.3 List and describe the normal functions of the muscle of facial expression and the muscles of mastication. (See also 2.10 and 2.15)
- 14.4 Describe the biomechanical effects of the muscles of facial expression and mastication (origin, insertion, action) on denture prostheses.
- 14.5 Describe and explain the dynamic relationships between functional occlusion and prosthetic design.
- 14.6 Describe the functional relationships between natural teeth and prosthetic appliances.
- 14.7 Describe the influences of saliva on denture prosthesis rehabilitation.

Anatomical Evaluation

- 14.8 Describe the anatomy of the TMJ and relate its function to denture prostheses.
- 14.9 Describe the anatomical relations of the following structures and list the influences of each on prosthesis construction including but not limited to:
 - 14.9.1 midline raphe
 - 14.9.2 mylohyoid ridge
 - 14.9.3 oblique ridge
 - 14.9.4 genial tubercles
 - 14.9.5 tuberosity
 - 14.9.6 retromolar pad
 - 14.9.8 frenum
 - 14.9.8 rugae
 - 14.9.9 vestibule
 - 14.9.10 hard palate

- 14.9.11 soft palate
- 14.9.12 floor of mouth
- 14.9.13 foramina
- 14.9.14 incisive papilla
- 14.9.15 hamular notch

14.10 Define the following terms and, for each, state the influences on prosthetic construction and stability, including but not limited to:

- 14.10.1 bony spicules
- 14.10.2 residual roots
- 14.10.3 undercut areas
- 14.10.4 hypertrophied tissues
- 14.10.5 atrophied tissues
- 14.10.6 exostosis
- 14.10.8 maxillary/mandibular tori

14.11 Describe the influences of tongue size, shape and range of movement on denture stability and function

14.12 Recognize intra-oral and extra-oral pathologic conditions which may effect denture aesthetics, phonetics or functions.

Patient Management

14.13 Demonstrate professional patient/client management.

14.14 Complete a medical/dental questionnaire.

14.15 Describe the importance of interprofessional relationships and explain those principles.

14.16 Utilize aseptic techniques during all procedures.
(See also 6.35)

14.16.1 Describe and demonstrate an effective handwashing routine.

14.17 Employ appropriate precautionary measures with high risk patients.

Examination

- 14.18 Conduct extra-oral inspection using visual and digital methods and other appropriate methods.
- 14.19 Conduct intra-oral inspection with:
 - 14.19.1 dentures in place
 - 14.19.2 dentures removed
- 14.20 Examine, assess and evaluate the aesthetics, function and phonetics of the existing prostheses.

Patient Records and Treatment Planning

- 14.21 Analyze all documented patient history information.
- 14.22 Establish a prosthetic treatment plan utilizing dental, medical, psychological, biomechanical and radiographic data.
- 14.23 Develop, present and discuss a treatment plan and prognosis.
- 14.24 Present treatment plan to the patient/client and discuss expectations and imitations.
- 14.25 Obtain patient consent.

Clinical Procedures (Preliminary Impressions)

- 14.26 Demonstrate operatory and patient preparation.
- 14.27 Select and adapt stock trays, prepare and manipulate the appropriate impression materials.
- 14.28 Manipulate the pertinent facial and/or oral tissues to give the desired results in the preliminary impressions.
- 14.29 Apply removal techniques and assess the resultant impressions.

- 14.30 Use correct handling and transporting procedures in the storing and casting of preliminary impressions.

Clinical Procedures (Final Impressions)

- 14.31 Design a custom tray for fabrication on the preliminary cast in preparation for peripheral border molding.
- 14.32 Apply border molding material in a sequential manner to the periphery of the tray and obtain correct extensions, within the limitations of the oral cavity, for the maximum support and retention.
- 14.33 Identify and manipulate the tissues involved in border molding.
- 14.34 Select, prepare and manipulate appropriate final impression materials.
- 14.35 Apply correct removal techniques of final impressions.
- 14.36 Evaluate the final impression for acceptability.
- 14.37 Conduct a post-impression examination for possible tissue trauma.

Clinical Procedures (Jaw Relations)

- 14.38 Place and seat record bases and assess adaptation to and stability on the alveolar ridge.
- 14.39 Contour occlusal rims to complement the patient's facial form.
- 14.40 Establish the occlusal plane using anatomical guide-lines.
- 14.41 Describe the procedures required to register the horizontal jaw relationship.
- 14.42 Establish the required horizontal and vertical jaw relationship.
- 14.43 Demonstrate the correct procedures to establish a face bow transfer.
- 14.44 Demonstrate and discuss the procedures required to establish centric relations utilizing an intraoral tracing device.

Jaw relations utilizing a pin tracing device

- 14.45 Describe and demonstrate the correct procedures required to establish, record and transfer horizontal and vertical jaw relationship.

Clinical Procedures (Trial Techniques)

- 14.46 Select artificial teeth for the prosthetic patient/client.
- 14.47 Evaluate wax trial denture for aesthetics, phonetics and function.

Clinical Procedures (Denture Insertion)

- 14.48 Insert completed dentures and evaluate for aesthetics, phonetics and function.
- 14.49 Perform the clinical remount.
- 14.50 Complete post insertion evaluation and adjustments.
- 14.51 Provide patient/client oriented, continuing oral care.

Transitional Immediate Dentures and Overdentures

- 14.52 Describe the procedures required for the construction designed of transitional dentures.
 - 14.52.1 Outline procedures for appropriate referrals to health care providers and other services in the community.
- 14.53 Describe the procedures required for the construction of immediate or temporary dentures.
- 14.54 Describe the procedures required for the construction of overdentures used for the correction of occlusal and aesthetic irregularities.

Relines and Repairs

- 14.55 Discuss the rationale and methods for establishing the need for temporary liners, long lasting soft liners and tissue conditioning.
- 14.56 Apply tissue conditioners/temporary relines.
- 14.57 Clinically assess repairs.
- 14.58 Describe the procedures required for the application of a long lasting soft lasting liner on new and or existing dentures.

15.00 REMOVABLE PARTIAL DENTURES (R.P.D.) (Items marked by * are outside scope of practice in Oregon, but are recommended as training related to dental health and care and community standards.)

Patient Management and Examination

- 15.1 Discuss the treatment objectives of partial dentures
- 15.2 Complete a consent form to treatment
- 15.3 List the armamentarium for an oral examination
- 15.4 Discuss the principles of an oral examination
- 15.5 Discuss the goals of an oral examination
- 15.6 Define:
 - 15.6.1 Examination
 - 15.6.2 Signs of disease
 - 15.6.3 Symptoms of disease
 - 15.6.4 Diagnosis
 - 15.6.5 Prognosis
 - 15.6.6 Treatment Planning
- 15.7 List the sequence of examination according to:

- 15.7.1 collection of data
- 15.7.2 method of examination
- 15.8 Describe the treatment providers role:
 - 15.7.8. Denturist
 - 15.7.8 Dentist
- 15.9 Describe and perform an examination and assessment according to areas of consideration.
 - 15.8.1 Physiologic
 - 15.8.2 Psychologic
 - 15.8.3 Systemic
- 15.10 Discuss the use and complete:
 - 15.10.1 Medical questionnaire
 - 15.10.2 Dental questionnaire
- 15.11 Discuss the significance of the questions in the health questionnaires
- 15.12 Discuss medical emergencies and describe the recognition, control and prevention.
 - 15.12.1 endocrine
 - 15.12.2 espiratory
 - 15.12.3 cardiovascular
 - 15.12.4 cerebrovascular
- 15.13 Discuss drug and allergic responses, syncope, epileptic seizure
- 15.14 Discuss the method and perform and extra-oral examination:
 - 15.14.1 general
 - 15.14.2 dentures in place
- 15.15 Describe a TMJ examination
- 15.16 Discuss and complete extra-oral assessment forms
- 15.17 Discuss and perform an intra-oral examination according to:

- 15.17.1 dentures in place
- 15.17.2 dentures removed
- 15.17.3 hard tissue assessment
- 15.17.4 remaining teeth assessment
- *15.17.5 periodontal ligament attachment
- 15.17.6 soft tissue examination
- *15.17.7 radiographic examination

15.18 Complete intra-oral soft tissues assessment forms

Charting

15.19 Discuss the general rules of charting

15.20 Discuss the purpose of complete dental charting

15.21 Describe the procedures to follow for complete dental charting. Complete a dental chart following charting principles.

15.22 Describe the classification of cavities

15.23 Describe charting symbols

15.24 Describe the types of occlusion and the classification of malocclusion

Diagnostic and Treatment Planning

15.25 Discuss diagnosis and treatment plan

15.26 Prepare a treatment plan for a partially edentulous patient.

15.27 Discuss the recording of the final treatment plan and the treatment sequence for a partial denture patient according to (reference 14.15):

- 15.27.1 soft tissue
- 15.27.2 hard tissue
- 15.27.3 surgical
- 15.27.4 periodontal
- 15.27.5 restorative
- 15.27.6 prosthetic

15.28 Discuss the treatment plan presentation:

15.28.1 verbal

15.28.2 written

15.29 Explain the importance of oral hygiene to a removable partial denture patient.

15.30 Explain the biological and mechanical function of removable partial dentures.

15.31 Describe the biomechanical effects of tooth loss in partially edentulous patient.

15.32 Explain the kinetic effects of loading on abutment teeth and the underlying mucosa.

15.33 Identify treatment alternatives for partially edentulous patients.

15.34 Explain the causes of ridges resorption and other pathologies in the partially edentulous patient.

15.35 Identify the load bearing mucosa.

15.36 Describe the histological changes which may accent to the mucosa in loading bearing areas.

15.37 Describe the effects of removable partial dentures on mastication, deglutition and digestion.

Impressions

15.38 Discuss impressions methods for a partial edentulous patient. Record preliminary impressions:

15.38.1 goal

15.38.2 impression material

15.38.3 patient preparation

15.38.4 tray selection

15.39 Discuss gypsum products.

Diagnostic Casts and Surveying

- 15.40 Discuss pouring diagnostic casts.
- 15.41 Discuss custom trays construction. Construct custom trays.
- 15.42 Discuss, impression techniques for:
 - 15.42.1 finals
 - 15.42.2 tooth borne partials
 - 15.42.3 free end partials
 - 15.42.4 altered cast techniques
- 15.43 Record impressions for the above.
- 15.44 Discuss pouring master casts and pour master cast.
- 15.45 Discuss diagnostic casts and diagnostic cast analysis.
- 15.46 Discuss the Kennedy Classification of partially edentulous arches.
- 15.47 Discuss the surveying of partially edentulous casts.
- 15.48 Discuss the surveying instrument and its use.

Removable Partial Denture Framework

- 15.49 List the components of R.P.D.
- 15.50 Discuss the types of major connectors in regard to:
 - 15.50.1 characteristics
 - 15.50.2 general considerations
 - 15.50.3 location
 - 15.50.4 relief
 - 15.50.5 waxing
- 15.51 Discuss minor connectors and their uses.
- 15.52 Discuss indirect retainers.

- 15.53 Discuss direct retainers.
- 15.54 Discuss the types of clasps and their uses.
- 15.55 Discuss the edentulous areas of an R.P.D.
- 15.56 Explain the concept of friction and retention.
- 15.57 Discuss guiding plaques.
- 15.58 Explain the biodynamics of an RPD planing.
- 15.59 Explain the concept of the axis of rotation
- 15.60 Explain the rotation on transversal, diagonal, sagittal and vertical axis.
- 15.61 Describe the selection of abutments.
- 15.62 Explain the principles of clasps design.
- 15.63 Discuss rapport with chrome lab.
- 15.64 Describe chrome cobalt alloys.
- 15.65 Discuss and perform the method of assessment of a framework.

Try-In Insertion

- 15.66 Describe and perform bite registration, procedures, establish vertical dimension, and selection of artificial teeth.
- 15.67 Describe evaluation of R.P.D. framework try in.
- 15.68 Describe and perform RPD insertion and delivery procedures.
- 15.69 Discuss iatrogenesis.
- 15.70 Discuss oral hygiene, instruction, cleaning and maintenance of an RPD.

- 15.71 Discuss patient education
 - 15.71.1 verbal
 - 15.71.2 written
- 15.72 Discuss retentive examination and after care of an RPD.
- 15.73 Discuss post insertion complaints.
- 15.74 Describe the method of evaluation of an RPD for reline or repair.

Acrylic Partial

- 15.75 Discuss acrylic partials pertaining to:
 - 15.75.1 indications
 - 15.75.2 procedures for construction
 - 15.75.3 design
 - 15.75.4 principles of design

Sterilization

- 15.76 Discuss sterilization procedures for removable partial dentures.

16.00 DENTAL MATERIALS

- 16.1 Outline the history of dental materials.
- 16.2 Describe the methods of testing material properties(chemical, physical, mechanical and biological).
- 16.3 Select appropriate dental materials according to their structural and mechanical properties.
- 16.4 Explain the structural and mechanical properties used when selecting dental materials.
- 16.5 Identify agencies that establish standards for dental materials.
- 16.6 State the necessity for specification of dental materials.

- 16.7 Describe and demonstrate safety procedures when using dental materials and equipment.
- 16.8 Use Material Safety Data Sheets (MSDS) effectively.
(See also 6.53)
- 16.9 Describe the composition, properties and application of dental materials including:
 - 16.9.1 gypsum products
 - 16.9.2 impression materials
 - 16.9.3 waxes and baseplates
 - 16.9.4 acrylic resins
 - 16.9.5 abrasive and polishing agents
 - 16.9.6 tissue conditioners, resilient liners and functional impression materials
 - 16.9.7 denture cleaner and adhesives
 - 16.9.8 acrylic and porcelain teeth
 - 16.9.9 solvents and cleaning agents
 - 16.9.10 light-cured resins
 - 16.9.11 dental metals and alloys
 - 16.9.12 separating media

17.00 COMMUNITY ORAL HEALTH FOR THE DENTURIST

- 17.1 Define health, community health, and community oral health.
- 17.2 Discuss current global, national and local initiatives in community oral healthcare.
- 17.3 Describe the oral healthcare system found in private practice.
- 17.4 Discuss the oral healthcare system found in the community (public) health system, including various government initiatives.
- 17.5 Define epidemiology, describe epidemiological methods, and the uses of epidemiology.
- 17.6 Define a dental index and describe the properties which characterize a good dental index.
- 17.7 Describe the dental indices utilized in measuring dental disease.
- 17.8 Describe the distribution of common oral diseases.

- 17.9 Describe the components of a good research paper and evaluate the scientific information.
- 17.10 Discuss oral healthcare with respect to need, demand, and utilization of services.
- 17.11 Discuss the principles of health education and health promotion.
- 17.12 Discuss the special oral healthcare needs of the following target populations: the elderly; racial minorities; those with sensory, motor or emotional challenges.
- 17.13 Describe the global challenges addressed by community oral health programs.
- 17.14 Design user-friendly practice settings which respond to the needs of all sectors of the community.
- 17.15 Discuss the role of the denturist in community oral health and research procedures.

18.00 REMOVABLE IMPLANT RETAINED SUPPORTED OVERDENTURES

Introduction To Osseointegration

- 18.1 Define osseointegration.
- 18.2 Discuss the history of osseointegration and osseointegrated implant systems.
- 18.3 Discuss the criteria for implant success.
- 18.4 Discuss the characteristics of osseointegrated implants, key factors of osseointegration and the soft tissue surrounding abutments.
- 18.5 Describe and discuss the biological considerations for implants regarding:
 - 18.5.1 Bone-implant interface
 - 18.5.2 Bone remodelling
 - 18.5.3 Foreign body reactions
 - 18.5.4 Mechanics of osseointegration
 - 18.5.5 Destruction of osseointegration
 - 18.5.6 Peri-implant membrane
 - 18.5.7 Disease activity of periodontium and peri-implant tissue
 - 18.5.8 The neuromuscular system as it relates to osseointegrated implants
- 18.6 Explain indications, contra-indications of the osseointegrated implant treatment.
- 18.7 Discuss complications and set-backs related to implant supported prosthesis or implant retained prosthesis.

Implant Team/Examination Treatment Planning & Patient Management

- 18.8 Discuss the composition role and responsibilities of the implant team members.
- 18.9 Recognize the need to refer for consultation.

18.9.1 Demonstrate ability to make appropriate referrals

- 18.10 Recognize that the oral surgeon, periodontist, or dentist trained in implant procedures are an integral part of the patient selection and treatment planning.
- 18.11 Perform an intra-oral examination and gather pertinent information through medical and dental history.
- 18.12 Perform a preliminary patient selection according to:
 - 18.12.1 Vital signs
 - 18.12.2 General health
 - 18.12.3 Oral health
 - 18.12.4 TMJ dysfunction
 - 18.12.5 Mental attitude
 - 18.12.6 Financial ability
- 18.13 Develop a conditional treatment plan and the limitations presented by his/hers general health.
- 18.14 Discuss indications for implant treatment and assessment requirements.
- 18.15 Discuss oral considerations that compromise the success of implant treatment.
- 18.16 Discuss and explain consent forms to the patient.
- 18.17 Discuss the advantages and disadvantages of implant supported or retained prosthesis.
- 18.18 Explain the fee structure (of treatment plan) and develop a mutually agreed upon payment plan.
- 18.19 List and explain the sequence of treatment for implant supported or retained prosthesis.

Implant Components and Implant Components Selection

- 18.20 Describe the main components of the implant structure.
- 18.21 Discuss and select implant components.

Treatment Sequence

Pre-surgical: Phase I and Phase II

- 18.22 Discuss the construction and analysis of presurgical diagnostic casts.
- 18.23 Construct a diagnostic wax up.
- 18.24 Construct a diagnostic splint and or a surgical splint (stent).
- 18.25 Discuss temporization period.
- 18.26 Examine and maintain the oral health of the patient post surgically (implant placement stage) by performing:
 - 18.26.1 Denture modifications
 - 18.26.2 Denture relines
- 18.27 Examine and maintain the oral health of the patient post surgically (abutment placing stage) by performing:
 - 18.27.1 Denture modifications
 - 18.27.2 Denture relines
- 18.28 Recognize the need to refer the patient to the other dental health professional team members on the first sign of abnormalities or complications post surgically.
 - 18.28.1 Implant placement stage
 - 18.28.2 Abutment placement stage
- 18.29 Discuss criteria for implant success.
- 18.30 Discuss abutment placement.
- 18.31 Discuss fixture assessment and abutment positioning.
- 18.32 Discuss tissue compression period.

Impression and Transfer Methods

- 18.33 Take preliminary impressions.
- 18.34 Construct custom trays using the direct impression technique.
- 18.35 Construct custom tray using the indirect impression technique.
- 18.37 Describe and employ the custom tray construction and indirect impression technique.
- 18.38 Describe and employ the custom tray construction and direct impression technique.
- 18.39 Describe and employ the construction of record bases and occlusal rims method for a ball or bar implant retained overdenture (2-4 fixtures).
- 18.40 Describe and employ the construction of record bases and occlusal rims for an implant supported overdenture (5-6 fixtures).
- 18.41 Describe and employ jaw relations recording technique for a ball retained and a bar implant retained and or supported overdenture (2-4 fixtures).
- 18.42 Describe and employ jaw relations recording technique for an implant supported practitioner removable overdenture (5-6 fixtures).
- 18.43 Select artificial teeth according to patient's: age, sex, skin color, arch size and interarch space.
- 18.44 Describe the technique required for a facebow transfer.

Prosthetic Treatment Options

- 18.45 Describe the procedures required for a two implant fixtures ball retained tissue supported prosthesis.
- 18.46 Describe the procedures required for a (2-4) implant fixtures bar retained tissue (5-6) tissue and or implant supported overdenture.

- 18.47 Describe the procedures required for a (5-6) implant fixtures implant supported practitioner removable overdenture.
- 18.48 Discuss patient lifestyle education, hygiene instructions and maintenance.
- 18.49 Explain the importance of periodic examinations and appropriate future treatments.
- 18.50 Discuss and explain the advantages and feasibility to upgrade to a practitioner removable prosthesis.
- 18.51 Establish and maintain a patient record and model storage system appropriate for the implant patient.
- 18.52 Discuss trouble shooting tips.
- 18.53 Develop and maintain appropriate correspondence with oral surgeon, implant specialized dentist and patient.
- 18.54 Describe the reline procedure for a ball or ring retained overdenture.
- 18.55 Describe the reline procedure for a bar retained or supported overdenture.
- 18.56 Describe the appropriate repair procedures for implant retained or supported overdentures.

19.00 SMALL BUSINESS MANAGEMENT

- 19.1 Evaluate the following as they apply to a denture clinic including:
 - 19.1.1 Ownership
 - 19.1.2 Liabilities
 - 19.1.3 Taxation
 - 19.1.4 Payroll
- 19.2 Describe the services available from financial institutions.
- 19.3 Recognize the liabilities and responsibilities that accrue from contracts, negotiable instruments and guarantees.
- 19.4 Describe the services available from the following:

- 19.4.1 Insurance broker
 - 19.4.2 Real estate agent
 - 19.4.3 Lawyer
 - 19.4.4 Financial adviser
 - 19.4.5 Accountant
 - 19.4.6 Dental suppliers
 - 19.4.7 Financial Institutions
 - 19.4.8 Federal or Provincial/State governments
- 19.5 Prepare invoices for various services.
 - 19.6 Open and establish an accounting ledger.
 - 19.7 Read and interpret financial statements.
 - 19.8 Discuss small business taxation.
 - 19.9 Establish a business plan for a denture clinic.
 - 19.10 Discuss recruitment and management of employees.
 - 19.11 Discuss the obligations and responsibilities of the employer and employee
 - 19.12 Discuss benefits/incentives to promote a happy and productive relationship.
 - 19.13 Discuss ethical method of staff dismissal and employer obligations

20.00 ETHICS, JURISPRUDENCE AND PROFESSIONAL RELATIONSHIPS

- 20.1 Establishing and maintaining ethical standards.
- 20.2 Denturist - patient relationships
 - 20.2.1 Implied and informed consent
 - 20.2.2 Duties, responsibilities, standards of care
 - 20.2.3 Malpractice/liability
- 20.3 (Deleted)

- 20.4 List a hierarchy of values which denturists can use in making ethical decisions about ethical issues.
- 20.5 Describe the various pressures that can adversely affect ethical behavior of denturists and analyze different methods of controlling these pressures.
- 20.6 Recognize ethical issues found in journal articles and critically assess the ethical reasoning employed by the author(s).
- 20.7 Write and defend a dental dilemma under the following headings:
 - 20.7.1 identify an ethical dilemma in a clinical practice setting
 - 20.7.2 demonstrate the ethical reflective process in critically examining the ethical dilemma
 - 20.7.3 demonstrate an ethical decision-making process in making a judgment about this ethical dilemma
 - 20.7.4 apply and analyze the profession's "Code of Ethics" with respect to its congruency with the profession's and community ethical principles
- 20.8 Analyze ethical interactions among the dentist, dental technicians and other allied health professionals.
- 20.9 Articulate the guidelines for preparing a dental legal report.
- 20.10 Articulate good record-keeping skills in order to reduce or minimize the exposure to a lawsuit.
- 20.11 List the current policy on infection control to be used by denturists.
- 20.12 Outline the legislative changes and issues facing today's denturists.
- 20.13 Discuss the various methods available to break the cycle of stress becoming distress.
- 20.14 Comment on the current issues of the 1990's; e.g., amalgam toxicity and AIDS.
- 20.15 (Moved to 10.16)
- 20.16 Basic categories of the law.
- 20.17 Historical perspective on Denture Technology in Oregon.

- 20.18 Review of the Oregon Dental Practice Act.
- 20.19 Review of the Oregon Denturist Statutes/Licensure.
- 20.20 The role of the Oregon Legislature.
- 20.21 The role of state regulatory bodies:
 - 20.21.1 Oregon Health
Division
 - 20.21.2 State Board of Denture Technology
 - 20.21.3 State Board of
Dentistry

21.00 PRACTICE MANAGEMENT

- 21.1 Recognize the legal requirements for and practical benefits of maintaining comprehensive patient records.
- 21.2 Discuss the importance of professional standards and ethics.
- 21.3 Describe the importance of effective communications with patient and other dental professionals.
- 21.4 Discuss the development of ethical marketing strategies.
 - 21.4.1 interoffice
 - 21.4.2 external
 - 21.4.3 discuss patient reports
- 21.5 Discuss patient evaluation forms.
- 21.6 Discuss the role of the staff in a denturist practice.
- 21.7 Discuss proper fee collecting strategies.
- 21.8 Discuss fee schedules, dental plans and third party coverage.
- 21.9 Communicate professionally with other members of the health care system.
- 21.10 Recognize the necessity of continuous professional development.
- 21.11 Discuss the advantages and disadvantages of:
 - 21.11.1 solo practice
 - 21.11.2 partnership
 - 21.11.3 associateship

22.00 NUTRITION

Functional Concepts

- 22.1 Describe the basic concepts of nutrition, stress management and physical fitness.
- 22.2 Describe the functions and significant food resources of vitamins and minerals.
- 22.3 Describe the processes involved in the food cycle.
- 22.4 Describe oral problems associated with dietary intake.

Nutrition

- 22.5 Describe the metabolism and major food sources of the energy yielding nutrients.
- 22.6 Identify the nutritional contribution made by each of the four food groups.
- 22.7 Describe the special nutritional considerations of the geriatric patient.

22.7.1 Senior nutrition (See also 7.2.8)

- 22.7.1.1 Introduction to nutrition
- 22.7.1.2 Nutrition status, food choices and diet planning for the elderly
- 22.7.1.3 Nutrition problems among the elderly
 - 22.7.1.3a
 - 22.7.1.3b
 - 22.7.1.3c
 - 22.7.1.3d
 - 22.7.1.3e
 - 22.7.1.3k
- 22.7.1.4 Nutrition and plaque disease
- 22.7.1.5 Digestion and absorption
- 22.7.1.6 Natural foods
- 22.7.1.7 Vitamins, minerals, other supplements
- 22.7.1.8 Carbohydrates
- 22.7.1.9 Fats and oils
- 22.7.1.10 Proteins

- 22.8 Describe the special nutritional considerations of the edentulous patient.

Diets

- 22.9 Assess the quality of his/her own diet.
- 22.10 Describe a suitable diet following surgery.
- 22.11 Outline the function of fiber in the diet.
- 22.12 Discuss the impact of alcohol on the diet.
- 22.13 Evaluate vegetarian meals.
- 22.14 Analyze a diet.
- 22.15 Describe the major factors influencing the dietary habits of the elderly.

Nutritional Factors.

- 22.16 Identify the dental considerations of sugar containing foods.
- 22.17 Describe the factors which contribute to obesity and the role physical activity can play.
- 22.18 Identify the role of diet, exercise and stress management in the prevention and management of coronary heart disease, diabetes and cancer.
- 22.19 List the common food allergies.
- 22.20 Describe the oral significance, if any, of excesses or deficiencies of any of the following minerals:
 - 22.20.1 calcium
 - 22.20.2 magnesium
 - 22.20.3 phosphorous (phosphate)
 - 22.20.4 potassium
 - 22.20.5 sodium
 - 22.20.6 chloride
 - 22.20.7 iodine
 - 22.20.8 iron
 - 22.20.9 zinc

23.00 EMERGENCY CARE

- 23.1 Describe the immediate treatment for common medical/dental emergencies (including medications).
- 23.1.1 shock; anaphylactic syncope
 - 23.1.2 insulin shock
 - 23.1.3 diabetic coma
 - 23.1.4 anginal attack
 - 23.1.5 myocardial infarction
 - 23.1.6 cerebrovascular accident
 - 23.1.7 asthmatic attack
 - 23.1.8 nose bleed
 - 23.1.9 eye injury
 - 23.1.10 dealing with emergency mental health crises
- 23.2 Obtain and maintain a valid CPR certification (Cardio Pulmonary Resuscitation)
- 23.3 Obtain a standard Red Cross First Aid card.
- 23.4 Accurately measure pulse, respiration and blood pressure, recognizing variations from the normal.