

DENTAL ASSISTANT

Program Overview Handbook



The Dental Assisting Vocational Program is an **800-hour** program that is designed to educate the student on how to successfully practice in a wide variety of dental health care settings as an integral part of the allied dental healthcare team. The dental assistant works under the direct and general supervision of a licensed dentist. The student will be trained to provide safe and competent patient care utilizing learned critical thinking and problem-solving skills. In addition, he or she will be able to use modernized technology to provide care in the dental specialty field.

Every student is expected to meet all the course requirements before being eligible for graduation. After completion, students will receive a vocational diploma and are eligible to take the Registered Dental Assistant State Examination. **RDA APPROVAL PENDING.**

Dental Assistant students will attend didactic and clinical laboratory classes. Students will receive **800** hours of combined didactic, laboratory instruction, career prep workshop and externship.

Didactic classes are provided in classroom settings on Mondays, Tuesdays, Wednesdays, and Thursdays. The Career Prep Workshop is Monday through Friday and follows the sixth module. In addition, students must complete **externship** hours in the dental clinic.

Classes required for Dental Assistant Program:

Class	Required?	Clinical Rotation
Introduction in Dental Assisting and Dental Terminology	Yes	Yes
Science in Dentistry	Yes	Yes
Oral Health & Prevention of Dental Disease	Yes	Yes
Infection Control in Dentistry	Yes	Yes
Occupational Health & Safety	Yes	Yes
Patient Information & Assessment	Yes	Yes
Foundation of Clinical Dentistry	Yes	Yes
Introduction to Dental Radiography	Yes	Yes
Comprehensive Dental Care	Yes	Yes
Dental Administrative	Yes	Yes
Dental Billing & Coding using Dental Practice Management/ Dentrix Software	Yes	Yes
CPR/AED/BLS	Yes	No
Dental Radiology/ X-ray Certificate	Yes	Yes
Coronal Polishing	Yes	Yes
Ultrasonic Scaling	No	No
Infection Control	Yes	Yes
California Dental Practice Act and HIPAA	Yes	No
High School Diploma or GED	Yes	No

DENTAL ASSISTANT PROGRAM

FACULTY

PROGRAM DIRECTOR

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MISSION STATEMENT (DAS)

“The Mission of Downey Adult School Career and Education Center is to provide high-quality, relevant, and industry specific programs that are accessible to adults in a variety of areas, including Career Technical Education (CTE), High School Diploma (HSD), General Education Development (GED), English as a Second Language (ESL), and Community Education (CE), resulting in gainful employment and/or personal enrichment and growth.”

SCHOOLWIDE LEARNER OUTCOMES (SLOs)

All students will meet the learner outcomes and standards of the specific program in which they are enrolled.

Schoolwide Learner Outcomes (SLOs)

Critical Thinkers. *Students will demonstrate the skills of Critical Thinking by:*

- acquiring and exhibiting active problem-solving skills.
- analyzing and applying new information to real life situations.

Lifelong Learners. *Students will demonstrate Lifelong Learning by:*

- continual growth through self-direction, motivation, and discipline.
- developing confidence by achieving personal and professional goals that benefit family and community.

Effective Communicators. *Students will Communicate Effectively by:*

- acquiring and articulating ideas clearly in verbal and written form.
- utilizing appropriate technology to acquire and communicate needed information.

Productive Citizens. *Students will be productive citizens and Contributing Community Members by:*

- accessing community and government resources.
- working and participating cooperatively in community and civic activities.

Vision Statement and Graduate Goals (Dental)

Vision Statement

The Dental Assistant Program provides a low-cost, high quality integrated vocational level academic and professional education to a diverse student population. Graduates will be competent to serve and educate individuals in the community and function as an integral member of the dental team. Graduates will provide ethical, quality patient care, which will be assessed, planned, implemented and evaluated in a safe and service-oriented environment. Graduates will be lifelong learners by reviewing the current research, which will enable them to make informed decisions regarding patient education, quality patient care, assisting the dentist and service to a multicultural community.

Program Goals

1. Dental Assistant Graduates will complete a comprehensive and integrated vocational level academic and professional education.
2. Dental Assistant Graduates will be competent to serve and educate individuals in the community.
3. Dental Assistant students will conduct quality patient care, which will be assessed, planned, implemented and evaluated in a safe and service-oriented environment.

Dental Assistant graduates will function as integral members of the allied dental healthcare team and be lifelong learners by reviewing current research data which will enable the graduate to make informed decisions regarding patient education, quality patient care and service to the community.

DOWNEY ADULT SCHOOL CAMPUS AND CLASSROOM POLICIES

- Turn cell phones and music devices off during class and hands-on training. If your cell phone is needed for special purposes, talk to the instructor for permission to put on vibrate.
- No talking while the instructor is lecturing. Respect your instructor and your peers this will minimize any distractions while class is in lecture.
- No foul (bad) language in the classroom. *Professionalism is always required in this career to succeed!*
- No eating or drinking inside the classroom. Only bottled water is allowed in class.
- No smoking in campus
- Do not leave any of your personal property unattended. This instructor is NOT responsible for any lost property.
- Use computers appropriately and only for school purposes. No downloading music, videos, or software online. Ask the teacher for permission before using the computer.
- If any equipment is not working properly, inform your instructor immediately to avoid any accidents. Do not try fixing the equipment by yourself.
- In the case of earthquake, calmly leave the classroom and go straight out to the parking lot. This will be the same protocol if there is a fire. Please do not leave until attendance is taken.

FACILITIES

NOTE: The following is a list of facilities and agencies that we anticipate using during the year. Students will be attending facilities approved by the District. This list may change during the year.

Training Facility	Physical Address with Zip code	Telephone Number
Downey Adult School	12340 Woodruff Ave., Downey, CA 90241	562-940-6200
Classroom	Room M104	
Lab	Room K83	

Dental Assistant Program Requirements

The following requirements must be furnished by the due date indicated:

- | | |
|---|--------------------|
| • High School Diploma (or Equivalent) | by enrollment date |
| • CPR Certification (AHA or ARC) | due March 21, 2022 |
| • Current TB test result - less than a year-old | due March 21, 2022 |
| • Hepatitis B vaccination records | due March 21, 2022 |
| • Proof of Covid-19 Vaccination | due March 21, 2022 |

***If you have a foreign High School diploma, you must have your diploma evaluated and turned in the official evaluated sealed copy to:

Downey Adult School - Dental Program

ATTENTION: Mr. Alejandro Valencia, *Dental Program Clerical Support*

(DAS Front Office)

12340 Woodruff Ave.,

Downey, CA 90241

(562) 940-6282

Contact information for Evaluation Company: Ask for High School General Report

Center for Applied Research, Evaluations, & Education, Inc.

Tel. no. (714) 237-9272

Web site: www.iescaree.com

***HEPATITIS B VACCINATION

Hepatitis B is an ever-present danger to any healthcare worker. During the Dental Assistant program, students may encounter Hepatitis B infected patients. It is required that students get immunized against the Hepatitis B Virus (HBV).

TAKE NOTE!!!

STUDENTS WILL BE AUTOMATICALLY DISMISSED FROM THE PROGRAM IF REQUIREMENTS HAVE NOT BEEN MET BY THE DUE DATE INDICATED.

ATTENDANCE POLICY

1. Regular attendance is required for students to participate in the classroom and laboratory experiences needed to meet learning objectives and acquire requisite skills. Classroom attendance policy for modules 2 through 6 is as follows:

Two (2) tardies = One (1) Absence

Three (3) Absences = Dropped from the module

Dental Assisting Module 1 is a **MUST PASS** module; a student may not move on to subsequent modules until the successful completion of Module 1. Students who fail Module 1 and wish to continue with the program, will be enrolled in the Module 1 immediately following the failed module AND will be charged **\$250 repeat module fee**. There will be only **ONE** additional opportunity to attempt successful completion of Module 1. Students are only allowed to repeat one module within the length of their program. Students **may not miss a single day** in Module 1 and **may not be late, not even once**. The two tardies and three absence policy does not apply during Module 1.

Please note: For students who fail and repeat Module 1, you will NO LONGER be allowed to repeat any additional modules. If you fail a second module, you will be administratively dismissed from the program.

The student can make up **15** hours within one module (3 days' worth in Modules 2 through 6). All missed hours are required to be made up. **Failure to make-up hours will result to the student being dropped from the module. If a student is sent home, the student will not be allowed to make up any hours for that day.**

Should a student fail any one module throughout the program, the student must continue attending the failed module and will receive a "No Credit [NC]" grade for this one module. The student will meet with the program director to fill out a module repeat form and pay the \$250 module repeat fee. Notes will be posted on the student's profile to signify which module the student will be repeating in Module 1. The format of Module 1 as a repeat module will be that of an independent study class. The same schedule for module 1 will be followed. Both, attendance and a grade will be posted in Module 1. This grade will replace any "NC" given. Students are only allowed to fail and repeat one module during their entire program. Failing more than one module will result in immediate dismissal from the program.

Attendance may be made up through attending other Dental Assistant class sessions OR typing a report related to the topic on the day of absence or dentistry-related current news or event. One page of report will equal to one (1) hour of absence. For example, if the student misses one whole class session composed of **5** hours, the student must submit a **5**-page report on the topic chosen. The topic must be emailed to the instructor as a proposal and an approval must be received to continue with the report. The report must be submitted within one week (7 days) from the time the student has returned from absence. Thereafter, the report will accrue an additional page for every week it is not submitted. If the student misses a test day **with** a valid excuse, a report must be submitted within two (2) days from the time he/she returns from absence. Failure to submit the report will result to a grade of zero (0) for the test.

The following criteria must be followed when completing a report:

- A topic proposal must be submitted via email to the instructor prior to starting the report. The proposal must contain the topic and a brief explanation of how it is relevant to current topic in class or how it is dentistry related. All references must be cited upon proposing.
- Font type must be either Times New Roman or Arial font.
- Font size must be no larger than 12 font size for Times New Roman and 10 font size for Arial.
- Paragraph spacing must be double spaced.
- Cite all used references in a separate page as part of the report submission.
- The report may be submitted via email or paper submission.
- www.dentalcare.care
- Powerpoints

Each student may only submit make up reports for up to fifteen (15) hours of absence, or three (3) absences. Thereafter, the student will automatically be dropped and be given a failing grade for the module.

2. Externship hours- must be completed within 9 weeks. Externship timesheets must be filled out completely. This includes: Student name, clinical site/location, time in and out, lunch, weekly total and must be signed by the supervisor. Failure to complete the form will not be counted for that week and will receive a "0" attendance. The Final Evaluation form must be filled out after completing the remaining hours to total 800 overall program hours. (Must be signed by the supervisor)

Note: All timesheets for externship must be turned in daily.

Reporting theory tardiness or absence:

3. The student must notify the Dental Program Director and Instructor if arrival at any theory class will be delayed 30 minutes or more from the beginning of that class, or if the student will be absent. It is the responsibility of the student to note the name of the person receiving the message.
4. Reporting laboratory tardiness or absence:
The student must notify the lab instructor directly if arrival at the clinical facility will be delayed 30 minutes or more from the assigned arrival time on each clinical day, or if the student will be absent.

NOTE: This 30-minute call-in rule applies to any variation in the usual theory or clinical schedule such as field trips, dental facility, educational meetings and make-up experiences.

5. Excessive tardiness is defined as late arrival to assigned class which results in the inability of a student to meet Didactic or Clinical objectives and is disruptive to the class order. This will also jeopardize obtaining a completion certificate/ diploma.
6. The program has a compressed schedule. Each day is the equivalent of one week of normal class. According to DOWNEY ADULT SCHOOL policy, if a student is absent the student cannot receive a certificate of completion/ diploma until the missed portion is taken in the next semester. Due to the great demand of this program, it is not guaranteed that there will be a space open in a future semester to allow taking the missed didactic session. Repetition of missed clinical objectives will be permitted only on a space available basis.

ABSENCE ALLOWANCES:

- Religious Observance & Holidays
- Bereavement
- Jury Duty

Religious Observance & Holy Days Policy

Students are permitted by DAS Attendance policy to be absent from class to observe a religious holy day. Instructors are asked to be responsive and accommodating to requests when students contact them **IN ADVANCE** to request such an excused absence. The student should be given an opportunity to make up missed work because of religious observance. Students are advised to scan their syllabi/course outlines/Academic Calendars at the beginning of their respective CTE Program Start Date to identify potential conflicts with their religious observances.

- Please note that this applies only to the sort of holy day that necessitates absence from class and/or whose religious requirements clearly conflict with aspects of academic performance.
- **Students who miss class to observe a specified religious holiday (with prior notice) are expected to make prior arrangements with their instructor to make up any work missed.**
- DAS is a clock-hours institution, therefore, **any coursework and clock-hours that are missed due to the observance of a religious holiday, MUST BE MADE UP WITHIN A WEEK OF SAID ABSENCE.**
- DAS reserves the right to honor the observance of religious holy days **only** when students have communicated such a request PRIOR to the day that the absence will occur.
- DAS will consider periods of formalized mourning (i.e. *shiva*) as prescribed by a student's religion for immediate family on a case-by-case basis.
 - Students must contact DAS Administration to discuss planning for periods of formalized mourning.

Students Responsibility:

- We strongly recommend that you contact your instructors at the very beginning of your CTE program's START DATE in order to inform them of your needed accommodations.
- If class is missed to observe a specified religious holiday student are expected to make prior arrangements with their instructor to make up any work missed
- **Any coursework and clock-hours that are missed due to the observance of a religious holiday, MUST BE MADE UP WITHIN A WEEK OF SAID ABSENCE.**
- As the religious holiday that you choose to observe approaches, you should send an official notification to your instructor that you will miss class in order to observe a religious holiday **VIA EMAIL.**

Guidance for Faculty:

Please be responsive to requests by enabling students who contact you **IN ADVANCE** to make up work missed because of religious observance. We recommend that, at the beginning of your course, you announce that students who will need religious accommodation come to you right away to work out a plan. We recommend that you avoid scheduling an exam on a major holy day or planning something that cannot be made up afterwards.

Bereavement Policy

DAS's allowance for absences due to Bereavement purposes aligns with the same standards which DAS's faculty and staff follow.

DAS has the right to request documentation that verifies the death of a family member (e.g., a funeral program or death certificate). It is up to the discretion of the DAS Principal to determine if a death outside of the immediate family warrants implementation of the student bereavement policy.

As defined in DUSD's Bereavement Policy, article IV, section G, bereavement absences shall not exceed more than **three (3) excused days, except when travel beyond a 300-mile radius or out-of-state is necessary, in which case the absences shall be extended to five (5) excused days.**

- Absences due to Bereavement will not be counted against a student's program's allowable absences. However, all missed coursework and clock-hours **MUST** be made up within one (1) week of a student's return to school.

Students Responsibility:

- Students who experience the death of an immediate family member, must email:
 - **Instructor**
 - **Program Director**
- Meet with Instructor in a timely fashion to plan for make-up coursework and clock-hours

Guidance for Faculty:

Upon receiving notification from student regarding the need for absences due to Bereavement, you must instruct students to also reach out to program director. Instructors will also reach out and inform Program Directors and CTE Clerical Support staff

TEXTBOOKS

Students must bring their textbooks every day in order to complete coursework.

The textbooks are listed as follows:

- 12th Edition- Modern Dental Assisting Textbook by BIRD & ROBINSON
ISBN: 978-0-3234-3030-2
- 12th Edition- Modern Dental Assisting Workbook by BIRD & ROBINSON
ISBN: 978--323-4301-9
- 6th Edition- Dental Instruments A Pocket Guide by Linda R. Boyd
ISBN: 978-0-323-4740-54

Students may continue to purchase the 11th edition for the textbook and workbook as well as the 5th edition of the instrument book if it is more economically feasible for them.

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FFDIDACTIC AND LABORATORY PERFORMANCE

Theory grades are completed on a percentage basis as follows:

- 92-100%= A
- 84- 91%= B
- 75- 83%= C
- Less than 75% is failing.

Students must pass every course with a minimum grade of 75%.

CERTIFICATION EXAMINATION POLICY

If a student fails a certification exam, whether it be written or practical, he/she may be given two other opportunities to retake the exam. If the student passes the retake exam, he/ she will be given the lowest passing score in replacement of the failing grade. However, if the student fails the second time around, he/she must repeat the whole module and must pay again to take the certification module.

HOMEWORK/PROJECTS

Any homework or projects assigned must be submitted on the due date given by the instructor. If there are any problems with the due date given, the student shall make arrangement with the instructor in advance (meaning not the day before the due date.) Students may turn in late assignments within 48 hours after the due date for a partial grade.

MAKING UP QUIZZES

A student who missed to take a quiz due to a valid absence may take the quiz no later than two (2) school days after he/she return to class. If quiz is not taken at that time, the student will be given a grade of zero for that missed quiz.

EXTRA CREDIT (E/C)

Opportunities for extra credit points will not be mandatorily given to everyone but will depend with each student's participation, conduct, and over-all performance in the class.

COMPUTER LAB GUIDELINES

The computers in the Allied Health Learning Center are for the use of students and staff of the Health Careers Department. There are no limitations on computer use as a learning tool, however, for the benefit of everyone, please follow some simple guidelines:

1. Please do not access or change the operating system or program settings. Let's keep all the machines in good working conditions.
2. Save your work in your own flash drive.
3. Tell a staff member when a problem occurs rather than try to fix it yourself. We don't know every answer, but we have other resources to call upon for assistance.
4. Please be thoughtful of paper use when printing documents so that we keep our waste to a minimum and save the forests.
5. Before leaving, please close all programs and windows down to the Desktop and leave the machine running for the next user.
6. Before leaving, please turn off your computer and clean as you go.
7. Please don't bring any food or drinks into the Computer Lab.

EXTERNSHIP PLACEMENT GUIDELINES:

It will be the responsibility of the Program Director to assign a student to one (1) school-approved dental facility for externship. However, if a student would like to request for placement in a non-contracted facility, the following steps should be followed:

1. At least sixty (60) days prior to externship, student must provide the business card of the office with the following information:
 - a. First and Last name of the Supervisor
 - b. Address
 - c. Telephone number
2. The Program Director will contact the site to confirm and acknowledge permission of student placement.
3. A contract will be drafted and printed by the **Program Director** to be reviewed by the facility.
4. Once the facility returns the signed externship agreement, it will be sent the school board for approval. The student may start externship while waiting for board approval upon the facility's discretion as the agreement will be ratified from the date it was signed.
5. An externship form will be provided by the clerical support. Student must fill out the assigned forms.

EXTERNSHIP

Once the student is placed in externship, the remaining program hours of hands-on experiential training **must** be completed within ten (9) weeks to successfully complete the externship portion. Failure to complete within the given time will result to the student being automatically withdrawn from the program.

TERMS UNDER WHICH STUDENTS MAY BE DENIED ACCESS TO CLINICAL FACILITIES

- Due to the fact that the Health Careers Program of Downey Adult School make extensive use of dental facilities, laboratories, and clinical facilities for clinical experience, it is necessary to assure the facilities that our students are not involved in drugs and/or alcohol abuse or illegal sexual behavior.
- Facilities may deny access to any person identified as a potential threat to the physical or emotional wellbeing of the patients or staff. Under Title 42 of the Code of Regulations:
- A facility may not allow any student who has been convicted of abuse, mistreatment, or neglect of another individual to care for patients.
- Your signature on the Acceptance of Policies form indicates that you have not been involved in or convicted of any crime relating to the above-mentioned activities. Should allegations of such activities be found, Downey Adult School may remove you from its clinical affiliations. In the event this should occur, it is understood that the obligation to resolve the issue to the satisfaction of the clinical institution is the student's responsibility.

NOTE: Last minute facility requests will not be accepted. The request must be initiated sixty (30) days prior to externship.

COURSE PAYMENT POLICY

Students are required to pay any outstanding balance of the course fees prior to receiving their certificates of completion. Students will be provided a payment plan schedule on the first day of class along with the career training schedule. Students must make payments every 15th of the month or risk the possibility of being dropped from the course. However, students may also make payments any time they are capable. To make your monthly payments, please call (562) 940-6218 or (562) 940-6236 and contact Ms. Madariaga or Ms. Gera or log into your account and process your payment online. Students balances should reflect a \$700 dollars payment made to enroll and a zero balance prior to completing externship.

DA 40WK Payment Schedule - Program fee \$6,999	Payment	Balance
Enrollment Payment	\$ 700.00	\$ 6,299
1st Payment - 15th of the Month	\$ 700.00	\$ 5,599
2nd Payment - 15th of the Month	\$ 700.00	\$ 4,899
3rd Payment - 15th of the Month	\$ 700.00	\$ 4,199
4th Payment – 15th of the Month	\$ 700.00	\$ 3,499
5th Payment – 15th of the Month	\$ 700.00	\$ 2,799
6th Payment – 15th of the Month	\$ 700.00	\$ 2,099
7th Payment – 15th of the Month	\$ 700.00	\$ 1,399
8th Payment – 15th of the Month	\$ 700.00	\$ 699
9th Payment – 15 th of the Month (Final Payment during externship)	\$ 699.00	\$ 0

REFUND POLICY

Downey Adult School follows a fair and equitable refund policy for the refund of fees and other institutional charges as adopted by the Commission on Occupational Education. Refunds are given if the class is canceled. If the student requests a refund, it must be prior to the third-class meeting, whether attended or not. Student initiated refunds will be reduced by a \$50 service charge and prorated to account for hours of class attended. ***All refunds must be requested in writing.***

To receive a refund, a student must complete a Refund Request Form from the main office. Once the form is completed by the student, it must be approved by Administration. Once approved, the refund request form is processed. The refund check is mailed to the student. The process may take up to six weeks

Refund of Title IV(R2T4) Policy

When a student withdraws or is dismissed from Downey Adult School, a determination of the earned and unearned portion of Title IV aid will be determined. The date of withdrawal or last date attended will be used according to attendance records generated by the school's attendance system (ASAP).

ALL POLICIES NEED TO BE FOLLOWED IN ORDER TO RECEIVE A CERTIFICATE. STUDENTS WILL BE AT INSTRUCTOR'S DISCRETION. POLICIES ARE SUBJECT TO CHANGE WITHOUT PRIOR NOTICE

Satisfactory Academic Progress (SAP)

According to Federal regulations, (34 CFR 668.16(e), 34 CFR 668.32 (f), 34 CFR 668.34), and institutional regulations, financial aid recipients must meet all Satisfactory Academic Progress (SAP) standards prior to the awarding and/or disbursing of any financial aid funds. A review of SAP will be on a quarterly basis. The Satisfactory Academic Progress Policy at Downey Adult School is measured using two standards: Qualitative and Quantitative.

Qualitative Standard: All Federal financial aid recipients must maintain a minimum of 75% average throughout the entire program.

Quantitative Standard: All Federal financial aid recipients must adhere to the standards set forth by their program of study. The maximum number of excused absences is also based on program. Please note that a written request (Petition for Extended Absences) must be submitted to the Financial Aid Review Committee. The petition must be submitted prior to the leave of absence.

Dental Assistant:

Must have completed **800** hours upon completion of didactic and hands on experience. The maximum number of excused absences is **three (3)** per module.

PERFORMANCE OBJECTIVES

In order to successfully complete the course, each student will do required practice competency of skills and will be evaluated by students and graded by instructor to receive a satisfactory grade. Students will also be able to seek employment in the dental field or continue with their education upon completion of course.

Module List

1. **Introduction to Dental Assistant Blended Module**
2. **Clinical Dentistry**
3. **Dental Radiology**
4. **Preventive Dentistry**
5. **Dental Laboratory Procedures**
6. **Dental Administration and Specialties**

COMPLETION REQUIREMENTS:

Students must pass, complete, and turn in all the necessary requirements in order to receive all certificates.

- ☐ Passed and finished all Modules (1-6)
- ☐ Career Prep
- ☐ Externship hours
- ☐ Dental Practice Act
- ☐ HIPAA
- ☐ Infection Control
- ☐ Dental Billing and Coding /Dentrix
- ☐ Coronal Polishing
- ☐ Dental Radiation Safety
- ☐ Sealants Certificate

DIPLOMA

- a. If you have completed the necessary documents and requirements, set up an appointment with the Program Director by calling Mr. Valencia at (562) 940-6282

Set-up an appointment with Mr. Alejandro Valencia to get a copy of your receipt – email:
avalencia@dusd.net

- ☐ Final evaluation from Externship site – provided to Mr. Valencia
- ☐ All requirements must be submitted by the indicated due date.

(TB test result, CPR/BLS, Hepatitis B, Covid-19 Vaccination, High School Diploma/ GED)

- ☐ Completion Requirements– All completed
- ☐ Externship Forms must be completed

Dates, days and year

Dentists/Supervisor signature

Total number of completed hours per week

Comments

***ISSUING DIPLOMA – will take 2-3 weeks after request. YOU HAVE TO CONTACT MR. ALEJANDRO VALENCIA TO GET YOUR DIPLOMA IN PERSON.**

1. STUDENTS MUST HAVE A WRITTEN REQUEST IF THE ORIGINAL DIPLOMA OR CERTIFICATE IS LOST OR MISPLACED AND MUST BE NOTARIZED BY THE NOTARY PUBLIC.

2. CERTIFICATIONS ONLY: IF THE LOST CERTIFICATE WAS ISSUED AT LEAST FIVE (5) YEARS FROM THE TIME IT WAS ORIGINALLY ISSUED TO THE PRESENT TIME OR IT WAS CLAIMED MISSING, THE STUDENT SHALL BE REQUIRED TO RETAKE THE CERTIFICATION PROGRAM.

3. A FEE OF **\$25.00** FOR A DUPLICATE COPY OF EACH CERTIFICATE OR DIPLOMA WILL BE CHARGED IF THE ORIGINAL IS LOST OR MISPLACED.

RECORDS AND EVIDENCE OF PROGRAM ATTENDANCE

Downey Adult School will maintain pre-requisite documents, attendance records, exam results, and extern documents for a period of no more than 5 years after graduation.

STUDENT SUPPORT SERVICES

Support services available to enrolled students include but are not limited to the following areas:

CODE OF ETHICS FOR HEALTH CARE WORKERS

1. The health care worker shall practice his/her profession with integrity.
2. The health care worker shall be loyal to the patient before all others.
3. The health care worker shall strive to know his/her limitations and so stay within the bounds of these limitations.
4. The health care worker shall constantly be aware of preventive measures necessary to ensure safety for the patient, self, and co-workers.
5. The health care worker is sincere and unselfish in the performance of his/her duties while rendering services.
6. The health care worker considers no duties too menial if it contributes to the welfare and comfort of the patient.
7. The health care worker accepts only that monetary compensation provided for in their employment contract and does not solicit gifts or participate in moneymaking activities for personal gain.
8. The health care worker holds in confidence all information written or verbal entrusted to him/her and will refrain from any discussion held outside of the appropriate medical setting.
9. The health care worker is aware of the proper chain of command and faithfully follows the directions of the supervisor and/or physician within the limitations of his/her duties and capacity.
10. The health care worker shall maintain good hygiene practices conducive to physical and emotional health, keeping in mind that he/she is a role model for the patient.
11. The health care worker refrains from entering conversations with the patient or co-workers about personal problems.
12. The health care worker refrains from partaking of drugs or alcoholic beverages before and during their assigned duty hours.
13. The health care worker respects the dignity of his/her uniform and abstains from conduct that would be unbecoming to the profession.
14. The health care worker respects the ethnic and religious beliefs of all persons.
15. The health care worker can accept constructive criticism knowing that this is a steppingstone toward professional growth.
16. The health care worker shall not visit the health care facilities and/or patients during after-duty hours unless give specific permission by authorized personnel.
17. The health care worker is willing to abide by the standards, rules, and regulations proper to the institution to which assigned and realizes that personal risk may be involved in the learning experience.
18. The health care worker refrains from developing personal relationships with patients and maintains a professional attitude and approach when involved in direct patient care.

SCHOLASTIC INTEGRITY

Since many definitions of ethical behavior are influenced by many factors, it is important that students of the Dental Assistant Program understand the ethical behaviors that are expected and required of students in this program.

Each student is charged with the responsibility of maintaining scholastic integrity. Sharing of knowledge on an exam or other assigned work is not only unethical, but in most cases penalizes students by giving an unfair estimate of his/her preparation and progress. Violations of instructions concerning exams and other assignments is properly within the area of student/faculty relations and as such will be subject to recommendations including loss of credit for the unit of work involved, failure in the course, or dismissal from the Program/School.

In addition, cheating is viewed as a demonstration of unethical, unprofessional behavior and a lack of responsibility. Ethical, professional, responsible behavior is considered by the Program faculty to be an essential characteristic of a Health Care Worker, and therefore, of students graduating from this program. The Dental Assistant program faculty and administration support this policy.

Academic honesty is a two-fold responsibility on the part of the student: first, not to cheat. Secondly, the student is not to enable others to cheat. Silence indicates consent and enables cheating to continue. Ethical standards dictate that the students observing cheating will take steps to halt it, which may include reporting of cheating to school officials.

Falsification of records including time sheets, hospital charts, etc..... are grounds for dismissal.

STANDARDS OF BEHAVIOR

CLASSROOM

In the classroom, the student will show respect for classmates and instructors by:

- Being on time for class. Call and or E-mail within 30 minutes if going to be late or absent.
- Bringing in textbooks and assigned handouts/materials to class.
- Being prepared for class by doing required reading and homework prior to class.
- Keeping attention focused on classroom learning activities while class in session.
- Not eating, drinking, or sleeping in class.
- Not walking in or out of classroom while learning activities are in progress.
- Not participating inside conversations during lectures.
- Using break times for meeting personal needs. (Restroom, phone calls, etc.)
- Not bringing music or games to class.
- Keeping watch alarms, cell phones, and pagers on silent mode during class.
- Using positive interpersonal and communication skills always.
- Adhering to school rules and program policies.
- Maintaining a positive attitude toward peers, staff and the learning process.

LABORATORY- In the dental lab or other clinical facilities used for the purposes of laboratory instruction, the student must:

- Report to assigned area on time. E-mail the Instructor within 30 minutes if going to be late or absent.
- Stay in assigned area unless authorized by instructor or designate.
- Keep peers and staff inform of whereabouts when leaving assigned area.
- Plan activities to stay within assigned time limits for break, conference, and patient activities.
- Establish good rapport with peers and staff.
- Display a positive, constructive, attitude toward all persons and the learning process.
- Accept and carry out assignments in a positive and professional manner.
- Show initiative in creating activities for patient education with proper staff supervision.
- Spend majority of time with patient/client.
- Participate appropriately in clinical conferences and other assigned meetings.
- Assist any patient, family, or unit personnel as needed.
- Show no evidence of impairment in function due to any reason including mental or physical illness, lack of sleep, or legal or illegal drugs or alcohol.

SAFETY/ Cal-DOSH POLICIES

- Only closed toe, nonskid sole shoes shall be worn in the laboratory
- Uniforms must be worn. The uniform cannot be tight or floppy.
- Long hair secured away from the face and beards must be neatly trimmed.
- Form the habit of keeping hands away from face to prevent contamination and infection.
- Form the Habit of frequently washing your hands:
 - Between patient contact.
 - After removal of barrier protection.
 - Before leaving the work area.
 - Before eating or drinking.
 - Immediately after using the lavatory.
 - Immediately after hands are contaminated with blood or body fluids
- Never eat, drink, or smoke during in the laboratory sessions.
- Do not store food or beverages in the laboratory or the laboratory refrigerators.
- Always use barrier control when handling contaminated items.
- Never create aerosol in the process of performing tests.
- Never use your mouth or tongue to seal any dental materials
- Remove lab coat when going to no lab areas such as the lunchroom.
- Be familiar with the fire safety rules of the laboratory.
 - Fire Extinguishers
 - Fire blankets
 - Emergency shower and eyewash locations.
- Know the location of the master power switches in the dental office and laboratory.
- Know Current CPR Guidelines:
 - Know the signs of a heart attack.
 - Know the signs of choking
 - Know what to do for electrocution accidents.
- Always file a work-related incident report especially after exposure to blood or body fluids.
- Keep all re-agent containers tightly closed and read the label of the container before use.
- Know the location of safety data sheets (SDS) that apply to the materials and reagents you are using.

- Attend all in-service meetings on safety.
- Know how to dispose of biohazard materials.
- Decontaminate bench tops after spills.
- Blood procurement trays should be disinfected weekly. Disposable trays should be discarded as Biohazardous material.
- Always make sure that containers are properly labeled.
- **ALL BIOHAZARDS EXPOSURES MUST BE REPORTED TO INSTRUCTOR (STERILE/NONSTERILE PUNCTURE EXPOSURES)**
- All needle and puncture wounds will be receiving medical attention. The student must fill out an incident report with the school or the facility. Student must receive clearance from doctor before returning to school.

BBP EXPOSURE POLICY

Purpose:

Maintain the highest standards of student and employee safety and clarify procedures for needle stick injuries and blood/body fluid exposure.

Background:

It is extremely important for all students, faculty and staff to understand and follow the policy and procedures for needle stick injuries and blood/body fluid exposure. Universal Precautions should always be used in all school laboratory environments. The following policy describes procedures that must be followed if a student or faculty member sustains a needle stick injury or blood/body fluid exposure. This policy is in accordance with The Department of labor Cal-DOSH administration 1910.1030.

Actions:

1. Communicate Cal-DOSH policy and procedures to students, exercise precautions
2. Report each needle stick incident or blood/bodily fluid exposure.
3. Follow up on each incident report as per the policy and procedures outlined below.

Blood borne Pathogens Exposure Policy

Students and faculty must use outmost caution when handling needles, scalpels and other sharp objects. Only safety devices may be used. Needles should not be bent, broken or recapped. Safety device mechanisms must be activated immediately after removing needles from the puncture site. Needles must be placed in a standard biohazard sharps container immediately. After removing the needle from the puncture site or immediately after never stick fingers into Sharps containers.

Anyone who suffers a needle stick, cut, or a mucus membrane (e.g., splash to the eye or mouth) exposure to blood or other body fluids, or experience exposure to blood or prolonged contact with blood – especially when exposed skin is chapped, abraded or afflicted with dermatitis – shall:

1. Report the incident immediately to the instructor, department director, school president. The school principal. The designated person will be responsible for managing the report consistent with this policy.
2. Wash wound/area thoroughly with soap and water
3. The affected person who has been exposed must immediately report to a local health care facility (preferably an Urgent Care Center) for proper medical follow-up.
4. The program director notified above in #1 must immediately complete a Student Accident Incident Report. (See Attached Pg. 14-15 for the form) The following items must be included and/or performed:
 - a. “Clean” needle stick: School personnel must document that a “clean” needle stick has occurred. A “clean” injury is one where the instrument involved has not been used on a person. The needle has just been exposed.
 - b. Needle stick/blood or body fluid exposure involving another person:
 - i. If the source person cannot be identified, the school manager shall note on the incident report that the source person is unknown.
 - ii. If the source person involved can be identified, the school manager shall record the source person’s name on the incident report. The school manager shall attempt to contact the source person and encourage him/her to submit to a blood test. The source person should be referred to a local health care provider. As a result, the source person will be informed by a medical professional of the test result(s). The school manager should encourage the source person to allow the test results to be shared with the medical professional treating the affected person. The school manager always has the obligation to maintain the confidentiality of both individuals and any test results. It is the responsibility of the program director to ensure that this confidentiality policy is carried out. The source person and affected person should be assured of the school’s confidentiality policy about this matter. In cases where the source individual is unwilling to be tested, the school manager cannot force the individual to be tested but should consistently refer him/her to an appropriate medical professional (not employed by the institution) to discuss medical protocol.
 - c. All incidents where the skin is broken, or exposure has taken place require a written report.
5. The program director shall review the Student Accident Incident Report to ensure that it is complete and accurate.
6. The student shall report the on-going status of the incident to the director of the program immediately in verbal and in writing. (Page 14 or 15). In no case shall the matter remain open or unresolved indefinitely.

7. Students who experience needle stick or blood exposure while on externship shall notify the program director. The program director will follow the standard procedures outline above.

STUDENT AND EXTERN ACCIDENT INSURANCE

The Student Accident Policy pays covered medical and dental expenses incurred by Students for injuries sustained while on campus or at clinical sites while on school sanctioned and supervised activities.

Coverage is provided on an "excess basis," after any other insurance, which the student may have on his/her own policy. It is important to note that coverage is limited to school sanctioned and supervised activities, including intramural sports. Interscholastic sports not related or authorized by the student's internship are excluded. Well and sick doctor visits are also excluded.

When an incident occurs:

1. Complete the Student Accident Incident Report on page 14 or 15.
2. Notify your program director and clerical support via e-mail and by calling them regarding the incident and set up an appointment within **24 hours**.
3. Show up on your appointment.
4. Bring the following:
 - a. Page 14 or 15 – Student Accident Incident Report (filled out and described)
 - b. Student must save their receipts if they pay out of their pocket.
5. Accident Claim Form will be provided by the instructor to fill out by the student.

DOWNEY UNIFIED SCHOOL DISTRICT

CAMPUS DRESS CODE AND GROOMING STANDARDS FOR ALL STUDENTS

1. The teacher shall inform a student who violates the dress standards or lacks personal hygiene. If an object or garment can be removed, without affecting modesty, the teacher shall direct the student to remove it. The student has the option to go home, if necessary, and change the garment. In addition, the student may return to class the same day. If a hygiene problem can be corrected at school or at home, the student should do so and return to class.
2. A student who refuses to obey a teacher's direct order regarding a dress code violation will be referred to the vice principal. Failure to comply with the dress and grooming standards will result in dismissal.
3. Since gang attire can change from a year to year, as well as from campus to campus, the directors and staff need to be sensitive to new gang attire used for recognition. After an incident has occurred in which attire by the participant can be established as a contributing disruptive factor, the specific clothing or object identified with the group can be added to the list of unacceptable school attire.

The following shall not be worn or displayed while a student is participating in classes, school related activities, or while conducting business on adult education campuses.

1. Clothing, jewelry, logos or words that show, advocate or advertise alcohol, drugs, and acts which are illegal, obscene or vulgar.
2. Clothing which is sexually suggestive or extremely brief such as low cut garments, strapless or off the shoulder tops, tank tops, bare midriffs (with or without a jacket), muscle shirts, fishnet tops, or short shorts (shorts must be mid-thigh in length).
3. Open thongs or bare feet.
4. Any outfit, garment, or accessory commonly recognized as connected with a group or gang that provokes others to act violently or be intimidated by fear of violence. This includes but is not limited to oversized pants, which are obviously two or more sizes too big, gathered around the waist with a belt and cut, slit fraying, or dragging trouser cuffs.
 - Knee-high pants with socks pulled up above the calf
 - Bandannas worn around the head or hanging out of clothing
 - Hair nets on men
 - In memory of ...shirts and initialed belt buckles
 - Heavy chains holding keys or wallets and spike collars, wrist bands, or metal toe shoes
5. Other articles of clothing, jewelry or accessories, or lack of personal hygiene, which in the judgment of the teacher, counselor or administrator pose a clear and immediate threat to the physical well-being or safety of other students and staff, and/or create a major distraction or disruption to the learning environment for students and staff.

FAILURE TO COMPLY MAY RESULT IN DISMISSAL FROM THE ADULT SCHOOL

LABORATORY FACILITY DRESS CODE FOR THE STUDENTS

Appearance is a form of nonverbal communication. A student's clean, conservative, well-groomed appearance helps to instill confidence and reduce anxiety in the health care consumer.

WOMEN:

- Grey lab coat, goggles, and scrub uniform (Black Uniform), (T-shirts are not acceptable as a uniform top).
- Any color socks or nylons for women wearing pants style uniform.
- Women must wear bras.
- Underwear color should not show through uniform.
- No acrylic nails or gel nail polish
- Hair tied up and above the neckline, no bangs
- Clean and presentable tennis shoes must be worn
- No heavy make-up or eyelashes

MEN:

- Grey lab coat, goggles, and scrub uniform (Black Uniform), and plain white undershirt or T-shirt free of designs or writing, holes, or tears.
- Underwear color should not show through uniform.
- Clean and presentable tennis shoes must be worn

Covid-19 Prevention Uniform Requirements:

- Face Shield
- Face Mask

All uniforms are to be wrinkle-free and freshly laundered daily. No extreme uniform or shoe styles are to be worn. No Baggies.

School ID

- School ID must always be worn properly and when in uniform or in business casual attire. Picture ID must also be worn in facilities where required. The student must replace lost or broken ID within 48 hours. IDs are given to the students once the instructor provides them with an ID ticket with their name and ID number. They will be sent to the office to take the picture for their ID card.

Jewelry will not be worn with the following exceptions:

- A single wedding band of smooth finished metal without stones, crevices or sharp edges may be worn if desired.
- Small stud earrings only that do not extend past the ear lobe. No dangling styles or hoops. No more than one per ear. No facial jewelry whatsoever.

Fanny Packs/Belt bags are not to be worn without the uniform.

GROOMING STANDARDS FOR CLINICAL FACILITIES

1. Students must be freshly showered with soap and use deodorant daily.
2. No perfume, cologne, or strong deodorant is to be worn at hospital.
3. Hair is to be clean, neat, and arranged off the collar. (Hair must not fall forward when leaning forward, i.e. long ponytails or chin length blunt cut hair).
4. Mustaches and beards are to be clean and trimmed to a moderate length.
5. Fingernails are to be clean, neat and short and no more than ¼ inch beyond the end of the fingers. Clear or light-colored polish may be worn without cracks or chips. No nail decorations.
6. Make-up is to be used conservatively. (Mascara/eye shadow should be light if used).
7. No extremes in style.

THE LAB INSTRUCTOR HAS FINAL APPROVAL OVER STUDENT'S GROOMING, UNIFORM, ACCESSORIES, AND OVERALL APPEARANCE. STUDENTS WILL BE SUSPENDED FOR THE DAY AND AN ABSENCE WILL RESULT IF THE SCHOOL AND HOSPITAL STANDARDS FOR DRESS, GROOMING, AND HYGIENE ARE NOT MET.

CHANGES IN PHYSICAL OR MENTAL HEALTH STATUS INCLUDING PREGNANCY

Prior to returning to theory or clinical following any physical or mental illness or injury, the student may be required to bring a physician's release to verify that they are free of communicable disease and physically and mentally able to resume the duties of a Dental Assistant student without harm to themselves or others. Also, any student who displays symptoms of physical, mental illness, or injury may be requested to obtain a physician release before continuing in the program. **All pregnant students are required to have physician approval in writing to remain in the program.**

VISITORS ON CAMPUS AND DENTAL OFFICE (Clinical Facility) POLICY

It is the policy of Downey Adult Education that only enrolled students attend classes. Any visitors to the campus and in the classrooms must have permission from on site or district management personnel.

DOWNEY UNIFIED SCHOOL DISTRICT SMOKE-FREE POLICY

It is the policy of Downey Unified School District that all school campuses are entirely smoke free. Smoking is not permitted inside any school district building or outside on any school district property including sidewalks and parking lots on school property. Adult students must leave the campus to smoke. Smoking in the parking lot or on the sidewalk in front of school property is not permitted.

DENTAL RADIATION SAFETY INSTRUCTION

WAIVER: *PREGNANCY NON-LIABILITY CONSENT FORM*

This agreement states that I, _____, hereby understand the possible safety hazards and consequences of continuing the Dental Radiation Safety Instruction course here in Downey Adult School. I understand that due to my current situation of being pregnant, radiation and other factors may affect my condition. I also was made aware prior to taking this class the precautions and consequences if I decide to pursue this course. I understand that I am solely responsible for my performance and ensuring my medical condition will not be affected by any of the hands-on training involved in this said course. I also recognize that the school, its staff, dentist, dental clinical sites, dental management or the instructors of this course have no responsibility for any outcome or effect of my performance to my medical condition.

Student Signature

Date

Instructor Signature

Date

*** **Note:** Please attach copy of consent notice from your doctor stating that you are still capable of taking the Dental Radiation Safety Course and performing the hands-on training. ***

LICENSURE

DENTAL ASSISTANT: Every student is expected to meet all the course requirements before being eligible for graduation. After completion, students will receive a vocational diploma and are eligible to take the Registered Dental Assistant State Examination after completing the program.

RDA APPLICATION: YOU MUST E-MAIL MR. VALENCIA AND SCHEDULE AN APPOINTMENT WITH THE DENTAL PROGRAM DIRECTOR TO RECEIVE YOUR RDA APPLICATION. THE DENTAL PROGRAM DIRECTOR WILL GUIDE YOU ON HOW TO FILL OUT YOUR APPLICATION AND GIVE YOU ALL THE INFORMATION FOR THE REVIEW CENTERS.

DENIAL OF LICENSURE (**Note: Contact the Dental Board if you have questions regarding your convictions*)

Licenses to practice as a Registered Dental Assistant are issued by the Dental Board of California, not by educational institutions. **Applicants for licensure must submit completed application, fingerprints, ALL Certifications including CPR /BLS, Diploma and Social Security number.** The department may deny licensure for convictions of certain offenses. The board is primarily concerned with offenses that have occurred within the past ten (10) years and are substantially related to the practice of the profession. These include, but are not limited to:

1. DUI
2. Drug abuse
3. Convictions of physical violence including:
 - Assault with a deadly weapon
 - Assault with intent to kill
 - Rape, and other sexual offenses
 - Kidnapping
 - Child Abuse
4. Arson
5. Numerous convictions of burglary or petty theft.

NOTE: Only the Dental Board of California will be able to check your eligibility for licensure if you have the conviction. You must submit the ORIGINAL court document if you are applying for licensure or permit.

Downey Adult School's Annual Security Report and Clery Act Crime Statistics

For Information regarding DAS's Annual Security Report and Clery Act Crime Statistics, please visit www.das.edu, click on "About Us" tab.

DENTAL ASSISTANT

Student Contract



Downey Adult School is pleased to welcome you as a student in our program. DAS provides career and technical training to assist students in obtaining careers and employment. Employers have specifically asked that we train students to be respectful, dress appropriately, display a positive attitude and be a punctual and dependable employee. With these requirements in mind, we have set forth the following agreement:

1. **ATTENDANCE:** I agree to arrive on time and attend class on a regular basis. After three (3) absences, I will be placed on academic probation and I understand that if I miss one more during my probation period, I will face disciplinary action by being dismissed from the module. This will force me to repeat it later after having paid the retake fee of \$250. I understand that two (2) times of tardiness will equal to one (1) absence.
2. **PROPER ATTIRE:** I agree to come to class dressed appropriately for my course. I understand that this includes proper hygiene and that the school program has specified uniform requirements. I may not wear acrylic or gel nails. No eyelash extensions or fake lashes are acceptable. My hair must be up in a bun and I may not wear any jewelry aside from a simple wedding band.
3. **PROFESSIONAL COURTESY AND RESPECT:** I agree to conduct myself with courtesy and show respect towards my fellow students and instructor. I will not use profanity or interrupt the instructor during a lecture by talking loudly or displaying disruptive behavior.
4. **CHEATING:** I understand that cheating is unacceptable and will result in disciplinary action, which could result in being dismissed from the Dental Assistant Program. I realize that cheating will reflect poorly on my employment outlook. I also agree not to remove any materials or equipment from the classroom at any time.
5. **CELL PHONES AND ANY ELECTRONIC DEVICES:** I agree not to use my cell phone or any electronic device during my class. I understand that it will be a distraction from my professional training. (Please limit your cell phone use to emergencies only.)
6. **COMPUTER AND INTERNET ACCESS:** I agree not to access inappropriate internet sites and will only access sites that pertain to my professional training. I also understand that any unapproved software cannot be uploaded or downloaded to or from the DAS computers. I understand that doing so will result in disciplinary action, which could result in dismissal from my course.
7. **PROGRAM REQUIREMENTS:** I understand that I am required to furnish a copy of my Immunization records (Hepatitis B, Current TB-Test Result, Covid-19 Vaccination) CPR Certification and High School Diploma (or equivalent) by the due date indicated by the instructor (*These are MANDATORY REQUIREMENTS FOR ALL HEALTHCARE PROFESSIONALS BY THE CDC AND CAL-DOSH*). I also understand that I am required to bring my textbook, workbook and other necessities for schoolwork in a daily basis. **I understand that if I do not submit my requirements by the due date indicated on my syllabus, then I will be automatically dismissed from the Dental Assistant program.**
8. **COURSE FEES AND PAYMENT PLANS:** I agree to pay my monthly payments on time and I fully understand that I am required to pay my FULL BALANCE by the end of the program in order to receive my certificates.

STUDENT NAME: _____

STUDENT SIGNATURE: _____ DATE: _____

DOWNEY ADULT SCHOOL

STUDENT EMERGENCY

INFORMATION

STUDENT NAME: _____ HOME TEL#: _____

ADDRESS: _____

1. MAY DOWNEY ADULT SCHOOL/ CLINICAL LABORATORY SITES AND ITS STAFF CALL A PHYSICIAN OR USE ANY AVAILABLE HOSPITAL IN CASE OF EMERGENCY? **YES OR NO***

(*If No, List your preferred Hospital and address: _____)

2. NAME OF PREFERRED PHYSICIAN: _____

ADDRESS: _____

TELEPHONE#: _____

3. NAME OF NEAREST RELATIVE, FRIEND, GUARDIAN OR SPOUSE:

NAME: _____ RELATIONSHIP TO STUDENT: _____

ADDRESS: _____

TELEPHONE #: _____ CELL #: _____

4. OPTIONAL INFORMATION: Do you have any health problems which might cause a problem such as heart trouble, diabetes, allergies, including latex allergy, etc.?

(PLEASE DESCRIBE BELOW):

5. LIST ALL THE MEDICATIONS YOU ARE TAKING INCLUDING NON-PRESCRIPTION DRUGS:

6. DO YOU WEAR CONTACT LENSES OR PRESCRIPTION GLASSES? **YES OR NO**

7. OTHER INFORMATION:

STUDENT /*GUARDIAN SIGNATURE _____ RELATIONSHIP: _____

NAME: _____ (PLEASE PRINT)

** If you are under 18 years of age your legal guardian or parents must fill out and sign this form.

STUDENT EXTERNSHIP AGREEMENT

Please read and initial each line as required to indicate that you understand and will comply with the expectations for an on-site externship.

1. _____ I understand that I must submit my timesheet daily by the time indicated by the instructor. Daily attendance timesheets MUST be filled out correctly and completely. Failure to submit a daily and completed timesheets will result to forfeiture of the hours I have done during that week. This will cause for my attendance to not be counted, therefore making me noncompliant and subject to dismissal from the course.

2. _____ I understand that I am obliged to notify both the instructor and the training site in advance of any absence during my training period.

3. _____ I understand that I am obliged to notify the assigned supervisor and my instructor immediately if any injury occurs while I am at the training site.

4. _____ I understand that I am obliged to conduct myself during training, as if it were a paying job, as follows:

* Be on time.

* Seek out work to do when my assignments are completed.

* Leave only when my shift is completed. * Conduct myself in a professional manner.

* Stay busy during training hours.

* Respect my externship site and follow all the rules and regulations.

5. _____ I acknowledge that every employee at the training site has something of value to teach me and I will comply with instructions from all employees, not just my immediate supervisor.

6. _____ I will ask questions and take notes regarding procedure performance, and I agree to request instructions or clarification if I am unsure of a task. I will request assistance whenever needed, and I will never attempt a task that I have not been trained to do.

7. _____ I understand that I will abide by the limits of my training. I am not obligated to do anything that I have not been trained to do, nor am I obligated to do anything that I feel uncomfortable doing.

8. _____ I will follow all the HIPAA guidelines of confidentiality and discretion. If I have a question regarding my instructional materials, I will ask my training supervisor outside the patients hearing. I will keep all information about patients and patient care private and confidential. I agree to discuss patient information only with the appropriate healthcare personnel.

9. _____ I agree to finish my remaining program hours of externship and finish my duties as an Extern student in my externship site on time. I will be given up to 9 weeks from the time I start my externship to complete my hours. If for any reason I need to be re-sited (sent to another site), a fee of \$250 will be applied to my current balance

10. _____ I understand that failure to comply with any of the school, instructor and externship job site expectations identified in this agreement and course syllabus may result in an interruption to or termination of my on-site training.

Student Name: _____ Date: _____

Signature: _____

Program Director Signature: _____

Personal Items Used for Classroom Purposes

1. The Downey Adult School- Downey Unified School District/ Clinical Laboratory Sites and its staff will not be responsible for any personal items brought to classes by students.
2. This is to include all furniture, tools, materials, or personal items. Items left in the classroom over four weeks, without student in attendance, or notification to instructor of reason for absence, will not be stored by the Downey Adult School/ Clinical Laboratory Sites and will be disposed of.
3. Downey Adult School/ Clinical Laboratory Sites and its staff will not be responsible for any lost personal items.
4. Anyone dropping the class must remove items as quickly as possible.

This is to verify that I have read, and understood the regulations pertaining to furniture, tools, materials and personal items brought to a Downey Adult School/Clinical Site.

Student's Signature

Date

PHOTOGRAPHY CONSENT FORM

This agreement states that I, _____, hereby understand that any photographs taken during classroom and clinical hands-on hours of the Clinical Dental Assisting Program and Orthodontic Assisting Program may be used for school publications, promotional publications (i.e. flyers, banners, billboards, online advertisements, etc.) and any print publications solely for the purpose of Downey Adult School's promotions and advertisements. I also understand that Downey Adult School/ Downey Unified School District, its administration as well as faculty staff will not be held responsible for any photographs published for purposes other than what is stated above. Any photographs published for purposes other than the ones stated above will be under my discretion.

Student Signature

Date

Student Body Piercing Disclaimer

I, _____, understand that Downey Unified School District/ Downey Adult School/ Clinical Laboratory Sites and its faculty will not be held responsible for any injuries due to body piercing of any kind. I understand that I was informed about the risks of having my piercing during a school-related activity and that I will be required to remove it for safety purposes. Refusal to remove piercing if asked will result in dismissal from class and a meeting with the program director.

Student Signature

Date

DENTAL OFFICE RULES AND REGULATIONS

1. I MUST RESPECT ALL EMPLOYEES, PATIENTS AND EXTERN/ INTERN STUDENTS AT THE CLINICAL SITE.
2. BE COURTEOUS WITH EVERY PERSON INSIDE THE CLINIC.
3. I MUST FOLLOW ALL CAL-DOSH, HIPAA PRIVACY AND CALIFORNIA INFECTION CONTROL STANDARDS.
4. I MUST ARRIVE ON TIME FOR MY APPOINTMENT IN ORDER TO BE ADMITTED IN CLASS.
5. I MUST BE PROPERLY GROOMED AND DRESSED FOR CLINICAL PRACTICE.
6. IF I BREAK OR STEAL ANY INSTRUMENTS, EQUIPMENT OR ANY OTHER MATERIALS AND CONSTRUCTIONS UNDER THE PROPERTY OF THE CLINICAL LABORATORY SITE AND/OR DOWNEY ADULT SCHOOL, I AGREE TO PAY THE COST OF REPAIR OR DAMAGES I HAVE MADE BY ACCIDENT OR IN PURPOSE. IF IT IS PROVEN BY EVIDENCE OR WITNESS THAT I HAVE DONE DAMAGE IN PURPOSE, I UNDERSTAND THAT THE CLINICAL LABORATORY SITE. MAY FILE LEGAL COMPLAINTS AGAINST ME.
7. CLINICAL LABORATORY SITE AND ITS STAFF MAY GIVE ME A WRITE UP OR DISMISS ME IF I SHOW ACT OF MISCONDUCT AND DO NOT COMPLY WITH THE RULES OF THE DENTAL OFFICE AND/OR DOWNEY ADULT SCHOOL.

I, _____, EFFECTIVE TODAY, _____

AGREE TO ALL THE TERMS AND CONDITIONS ABOVE AND FULLY UNDERSTAND ALL THE REGULATIONS INSIDE THE CLINIC.

STUDENT SIGNATURE

ACKNOWLEDGMENT

I have read and understood all the sections and information as written in the Dental Assistant overview, syllabus and student contract.

**ADMINISTRATION AND STAFF
SCHOOL VISION/MISSION STATEMENT
FACILITIES
REQUIREMENTS
SUPPORT SERVICES
CODE OF ETHICS
SCHOLASTIC INTEGRITY
STANDARDS OF BEHAVIOR
SAFETY/OSHA POLICIES
BLOODBORNE PATHOGENS EXPOSURE POLICY
STUDENT AND EXTERN ACCIDENT INSURANCE
BBP INCIDENT REPORT
ATTENDANCE POLICY
DRESS CODE/GROOMING STANDARDS
GRADING / DISTRIBUTION POLICY
CHANGE IN HEALTH STATUS POLICY
VISITORS/SMOKE FREE POLICY
PREGNANCY WAIVER
DENIAL OF ACCESS TO CLINICAL FACILITIES
LICENSURE
RECORD AND EVIDENCE OF PROGRAM ATTENDANCE
LEARNING CENTER/COMPUTER LAB GUIDELINES
HEPATITIS B STATEMENT
STUDENT ACADEMIC PERFORMANCE COMPLIANCE
CONTRACTS**

Print Name _____

Signature

Date

Computer Usage Agreement

The use of the Downey Unified School District electronic information services is a privilege and inappropriate use will result in the loss of that privilege. Any user who is found to be in violation of these rules may be subject to some or all of following consequences: suspension and/or termination of computer use privileges, suspension and/or expulsion from school, referral to law enforcement authorities for criminal prosecution, and other legal action, including action to recover damages and penalties.

- Do not reveal your personal information, or any other private or personal information about others under any circumstances.
- Using the network in violation of federal, state and local laws
- Using the network to access peer-to-peer file sharing networks such as Kazaa, Limewire, Audio Galaxy, Bear Share and Morpheus
- Using the network for commercial advertising
- Using copyrighted materials in reports without permission
- Using the network to access and or distribute a file that contains pornographic and/or illegal material. Must notify a staff member whenever coming across such information.
- Using the network to send/request material that is inflammatory and/or racist
- Using the network to threaten, harass or post false or defamatory information about a person or organization
- Creating and/or intentionally placing a computer virus on the network
- Connecting or installing unauthorized equipment and/or devices to the network such as access points, routers, gateways, and non-District computers and peripherals
- Using any hardware or software that interferes with the District network
- Using the network to make purchases or conduct other personal business during school hours
- Using the network to access/process pornographic or otherwise inappropriate material.

STUDENT:

I have read the Downey Unified School District's Acceptable Use Agreement. I understand that any violation of the regulations or policies in the Acceptable Use Agreement is unethical and may constitute a criminal offense. If I violate any of the conditions in this agreement, my access privileges may be revoked, and school disciplinary action and/or legal action may be invoked. (Reference: Board Policy and Administrative Regulations 3136.2)

STUDENT NAME: (Please Print)

Last Name

First Name

STUDENT SIGNATURE

Date