

Dental Hygiene

APRC 1997-1998

Section 1 of 3

97-98



**DENTAL HYGIENE PROGRAM
COLLEGE OF ALLIED HEALTH SCIENCES
FERRIS STATE UNIVERSITY**

**ACADEMIC PROGRAM REVIEW REPORT
SEPTEMBER 15, 1997**

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SECTION ONE: OVERVIEW OF THE PROGRAM

Introduction

The Dental Hygiene program is two years in length and leads to an Associate in Applied Science Degree. The professional sequence is five semesters with a total of 77 semester hours of credit required for completion.

The admission criteria for the dental hygiene program includes application date of the student as well as the following:

Directly Admitted From High School

- A 3.0 cumulative grade point average
- One year of biology with a B or better
- One year of chemistry with a B or better
- A score of 19 or above on the math section of the ACT

***College Transfer**

- A 2.5 cumulative grade point average
- One semester of biology (including a lab) with a C or better
- One semester of chemistry (including a lab) with a C or better
- Math 110 or the equivalent with a minimum grade of "C" (2.0) or a score of 19 or above on the math section of the ACT.

*Applicants lacking the high school requirements may correct any deficiencies by completing the appropriate course requirements at the collegiate level.

All entering students must complete BIOL 205 and CHEM 114 prior to beginning the professional sequence of the program in the Fall Semester. Many students elect to complete the two classes the year prior to beginning the professional sequence.

In addition to University requirements for general education courses, the dental hygiene students are required to receive a "C" grade in all dental hygiene courses as they are listed on the dental hygiene checksheet. Failure to meet this requirement could result in dismissal from the professional sequence (see Progression Policy, Appendix D).

Clinical laboratory experiences are acquired on campus in the dental hygiene clinic. A thirty chair clinic is equipped for students to develop skills and render patient treatment to the general public. The dental hygiene clinic patients come from an approximate 90 mile radius to receive supervised treatment. The services performed in the clinic by the students include: prophylaxis, radiographs, fluoride treatments, oral examinations, oral irrigation, placement of pit and fissure sealants, and amalgam polishing. All clinical procedures are supervised by registered dental hygienists or dentist.

Students begin patient treatment during the winter semester of the first year of the professional sequence. Student faculty ratios during patient treatment clinics are 6:1, which is in compliance with the ADA (American Dental Association) Accreditation Standards.

Mission

To be the leading dental hygiene program in the Northeast/Midwest in preparing students with career and life skills that meet the needs of employers, and produce graduates who continually strive to improve their professional skills.

Goals

Provide students with educational experiences that prepare them for entry level into the profession.

Provide a variety of learning activities to address the diverse learning styles of students.

Enhance the professional skills of the dental hygiene staff.

Provide 55-60 graduates each year to the dental industry.

SECTION TWO: PROGRAM HISTORY

The Dental Hygiene Program at Ferris State University began in 1966. The program has a quota of 60 students with a fall entry point. The Program at Ferris State University is one of the largest dental hygiene program in the country.

The Program is fully accredited by the American Dental Association (ADA), Commission on Dental Accreditation. In order to be eligible for licensure to practice dental hygiene in Michigan, and most other states, students must graduate from a program accredited by the ADA Commission on Dental Accreditation. The program received "approval" following the 1991 site visit. The next site visit is scheduled for fall of 1998.

Impact of the Program on The University, the State, and the Nation

The Dental Hygiene Program at Ferris State University is one of twelve such programs in the state. Two programs offer bachelors degrees and are associated with a dental school. Nine programs are community college based. Ferris State University is the only University Dental Hygiene Program in the state not associated with a dental school.

Ferris State University is the major supplier of dental hygienists to the State of Michigan because of our number of graduates. The Ferris Dental Hygiene program is geographically the most northern program in Michigan. It attracts a significant number of students from northern Michigan including the Upper Peninsula, as well as students from many other communities throughout the state. In recent years, the program has attracted students from California, Alaska, Illinois, and Canada.

Program graduates primarily are employed in general practice dental offices. Other job opportunities include: specialty offices, correctional facilities, hospitals, public health departments, research, sales or marketing, and educational.

Employment demands for Ferris graduates are excellent. Often students have secured jobs in the field prior to graduation. Survey results from 1996 provided by the American Dental Hygienists' Association, report the national average yearly salary to be \$37,619.00.

Expectations

Dental hygienists will continue to be in demand on both the state and the national level. Numerous job opportunities will be available for graduates looking for employment in the dental hygiene field.

Some of our graduates will go on to continue their education and obtain B.S. Degrees in Applied Biology, Allied Health Teacher Education, Marketing, Business, Communications, Health Systems Management, ISYS, and some continue to go to dental school.

Plans for Improvement

The curriculum underwent thorough review in preparation for semester transition. Yearly curriculum revisions are ongoing. We currently are working on revisions in dental anatomy, head and neck anatomy, dental materials, dental specialties, and chemistry. Curriculum revisions will be submitted during this academic year.

Equipment replacement options for the dental hygiene clinic are currently under review. While the majority of the dental units were purchased during 1978 in conjunction with the construction of the Victor F. Spathelf Center for Allied Health, some equipment was transferred from the previous dental clinic site in the Swan Building. Equipment breakdowns are frequent because of the age of the equipment and 36-40 hours of use per week.

In addition to the current SLA's (Structured Learning Assistance) in pharmacy and dental anatomy, plans to add another SLA for DHYG 131 (Radiography) are currently in progress. The SLA will begin during Winter semester, 1998.

Alternative teaching delivery methods are being explored which include computer instruction modules and distance learning.

Our need to increase radiography facilities has resulted in consultation with the University architect.

SECTION THREE: CURRICULUM EVALUATION

The evaluation of the curriculum for the Dental Hygiene Program is an ongoing process. It should be noted, the program is currently in the process of reviewing the curriculum, and will submit proposed curriculum changes during this academic year.

Science Courses

Students are required to complete the following science courses: BIOL 205, Anatomy and Physiology; CHEM 114, Introduction to General Chemistry; CHEM 124, Introduction to Organic and Biochemistry; and BIOL 108, Medical Microbiology. The faculty feel one chemistry course instead of two, designed to meet ADA Accreditation standards, would be in the best interest of the students. Preliminary discussions with the Chemistry Department are in progress.

General Education Courses

Dental Hygiene students are required to take SOCY 121, Sociology; PSYC 150, Introduction to Psychology; COMM 105, Interpersonal Communication; and a Cultural Enrichment Elective.

Mathematics

Math 110, Fundamentals of Algebra or the equivalent/proficiency (ACT of 19 or above, satisfactory score on CLEP or Algebra Course Placement test) is required for admission into the program.

English

ENGL 150, English 1 and ENGL 250, English 2 are required as part of the curriculum.

Dental Hygiene Courses

Many of the dental hygiene courses include a lecture and laboratory component. The clinical dental hygiene practice courses have laboratories that meet 6-12 hours each week, depending on the course. The student faculty ratio of 6:1 (ADA Accreditation standards) allows for individual instruction that meets the needs of different learning styles and hands-on instruction. One recommendation for curriculum revision is to add a seminar time into the clinical practice courses, (they are laboratory/patient treatment only). The seminar time would allow for group discussions and case study presentations related to clinical experience. The dental anatomy, histology and embryology courses had a laboratory component under the quarter system. One recommendation is to add a laboratory session to the dental anatomy course. The dental anatomy material is currently condensed into a 5 week period of lecture instruction only. It is the opinion of the faculty that this information needs additional lecture time and laboratory application (i.e., viewing extracted teeth for identification).

The Dental Hygiene Program faculty will assume teaching responsibilities for the DHYG 216, Head and Neck Anatomy course during Winter semester, 1998.

The elective, DHYG 250, Pain Management for the Dental Hygiene Practice, has been offered for three years. This course enhances information on the mechanism of pain and methods of pain management in dental hygiene practice. The course is beneficial in preparation for the National Board Dental Hygiene Examination. It can be a foundation for students who intend to practice in areas of the country where delivery of local anesthesia is a dental hygiene function.

The program's Clinical Laboratory Coordinator has partial responsibility of providing tutoring in both pre-clinical and clinical courses. This additional support for students with clinic related weaknesses has improved their success in passing the clinic related courses.

FERRIS STATE UNIVERSITY
DENTAL HYGIENE - ASSOCIATE IN APPLIED SCIENCE DEGREE

NOTE: Meeting requirements for graduation is the responsibility of the student. Your advisor is available to assist you.

NAME _____

FIRST YEAR

<u>Summer Semester</u>	<u>Cr Grade</u>
**BIOL 205-Anatomy & Physiology (Concurrent or prior enrollment in CHEM 114)	5 _____
**CHEM 114-Intro to Gen. Chem. (CHEM 103 or equivalent & MATH 110 Prof.)	4 _____ 9 _____

SECOND YEAR

<u>Fall Semester</u>	<u>Cr Grade</u>
**CHEM 124-Intro. to Organic & Biochem. (CHEM 114)	3 _____
DHYG 112-Dent. Anat., Hist. & Enbry. (Admission to Program)	3 _____
DHYG 114-Clin. Dental Hygiene 1 (Admission to Program)	4 _____
DHYG 136-Dental Specialties 2 (Admission to Program)	2 _____
*COMM 105-Interpersonal Comm.	3 _____
**BIOL 108-Medical Microbiology	3 _____
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<u>Fall Semester</u>	<u>Cr Grade</u>
DHYG 211-Dental Materials (DHYG 112)	2 _____
DHYG 214-Clin. Dent. Hyg. Theory 3 (DHYG 124 & DHYG 125)	2 _____
DHYG 215-Clinical Dental Practice 3 (DHYG 114 & 125)	3 _____
DHYG 223-Pharm. for Dental Hygiene (DHYG 228 & CHEM 124)	2 _____
DHYG 226-Comm. Dentistry 1 (2nd Year DH Standing)	2 _____
DHYG 230-Periodontics (BIOL 108 or equivalent)	3 _____
*ENGL 250-English 2 (ENGL 150)	3 _____
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<u>Winter Semester</u>	<u>Cr Grade</u>
DHYG 131-Dental Radiology (DHYG 112)	3 _____
DHYG 124-Clin. Dent. Hyg. Theory 2 (DHYG 114)	2 _____
DHYG 125-Clin. Dent. Hyg. Prac. 2 (DHYG 114)	2 _____
DHYG 216-Head & Neck Anatomy (BIOL 205 or Equivalent)	2 _____
DHYG 228-Gen. & Oral Pathology (BIOL 205 or Equivalent)	3 _____
*ENGL 150-English 1	3 _____
*CAHS 231-Nutrition for the DH (BIOL 205 or Equivalent)	2 _____
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<u>Winter Semester</u>	<u>Cr Grade</u>
DHYG 224-Clin. Dent. Hyg. Theory 4 (DHYG 214 & 215)	2 _____
DHYG 225-Clin. Dent. Hyg. Prac. 4 (DHYG 211, 214 & 215)	3 _____
DHYG 236-Community Dentistry 2 (DHYG 226)	1 _____
DHYG 240-Dental Hygiene Seminar (Final Semester Standing)	1 _____
*SOCY 121 Sociology	3 _____
*PSYC 150-Intro. to Psychology	3 _____
*Cultural Enrichment Elect	3 _____
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MATH 110-Fundamentals of Algebra or equivalent/proficiency (ACT of 19 or above, satisfactory score on CLEP or Algebra Course Placement test) required for admission.

*Must be completed prior to graduation.

**May be taken prior to the semester listed. If not, must be taken semester listed.

Prerequisites are identified in parentheses. All prerequisite courses require successful completion prior to enrollment in listed courses.

77 semester Hours are required for graduation

FERRIS STATE UNIVERSITY

College of Allied Health Sciences

Dental Hygiene

Associate in Applied Science Degree

Dental hygiene as a career

Hygienists work with patients in promoting dental health and are an important part of the professional dental health team. They can look forward to satisfying and rewarding careers.

The hygienist works under the direction and supervision of a dentist and is licensed by the state in which he or she practices.

In Michigan, a dental hygienist's responsibilities include giving dental health instruction and nutritional counseling; performing oral examinations; scaling and polishing teeth; exposing, processing, mounting and interpreting x-rays.

In addition, responsibilities include taking impressions and preparing diagnostic models; applying topical fluoride, pit and fissure sealants; applying post-extraction, periodontal and sedative dressings; periodontal soft tissue curettage; and polishing amalgam restorations.

A majority of hygienists work in government health agencies, school systems, hospital and industrial clinics, military services and in the care of geriatric and handicapped patients.

What does Ferris offer?

The two-year plus one semester program in dental hygiene at Ferris State University leads to an associate in applied science degree.

The program, accredited by the American Dental Association Commission on Dental Accreditation, is a demanding one. Instruction is individualized and standards are high.

To assure students of quality training, enrollment is limited. These limitations in class size, coupled with the popularity of the program, have created a competitive situation for application.

Two dental organization chapters on campus promote scholarship, community service and the allied dental professions.

Pi Delta Alpha membership includes dental assistants, dental hygienists and dental technologists.

The Ferris chapter of the American Dental Hygienists' Association (Student

American Dental Hygienists' Association) promotes leadership, community service and professionalism.

Who may enroll?

High school students may receive conditional acceptance after their junior year and full acceptance upon graduation with an overall B (3.0) grade point average.

In addition, applicants must have one year each of biology and chemistry with at least a B grade in all courses, and they must score a minimum of 19 on the math portion of the ACT.

A minimum one year of algebra and one semester of geometry is recommended.

Students transferring from a Ferris curriculum or another college or university must document: (a) an overall 2.5 grade point average; (b) a minimum of one semester each of biology and chemistry (each with labs) with at least C (2.0) grades in all courses; and (c) Math 110 or the equivalent with at least a C grade.

Although not required, one year of college course work prior to enrollment in this program has been popular and helpful in establishing good study skills and scheduling.

Students are accepted by priority of application dates, so it is essential to apply for admission early.

The curriculum involves expenses above the normal. Students are required





to spend about \$3,800 for instruments, uniforms and books. Michigan licensure examinations amount to an additional \$550.

Students are asked not to purchase used instruments and supplies from former students because specific requirements may change from year to year and substitutions are not permitted.

More information

For more information about this program, write: Dental Hygiene, Ferris State University, 200 Ferris Drive, Big Rapids, MI 49307-2740; or call (616) 592-2261 or 1-800-462-8553.

General information

Ferris State University is in its second century as one of the nation's premier technical and professional universities, providing the education to make its graduates immediately employable in their chosen fields.

Approximately 100 educational programs — including doctorates, master's, bachelor's and associate degrees — are offered through the colleges of Allied Health Sciences, Arts and Sciences, Business, Education, Optometry, Pharmacy and Technology.

A wide variety of student organizations are active on campus, encompassing social, athletic, political, performing arts and religious activities and interests.

Arts and cultural events, varsity athletics and an extensive intramural

sports program further enrich student life.

The University has on-campus residential facilities for about 50 percent of its approximately 10,000 students.

Founded in 1884 by Michigan educator and statesman Woodbridge N. Ferris, the University has developed a modern, 600-acre campus in Big Rapids, in west central Michigan's vacation-recreation country.

How to enroll

Student applications may be obtained by writing to: Admissions Office, Ferris State University, 420 Oak St., Big Rapids, MI 49307-2020.

Applications are also available at the offices of Michigan high school and community college counselors.

The completed application must be returned to the Admissions Office well in advance of the semester in which the student expects to enroll.

Further information may be obtained by calling the Admissions Office at 1-800-4-FERRIS (MI, IL, IN, OH, WI) or (616) 592-2100.

Financial aid

At Ferris, students may qualify for some form of financial aid, including scholarships, grants-in-aid, long-term loans or part-time employment.

The University annually awards more than \$40 million in total student aid.

For more information, write: Financial Aid Office, Ferris State University, 420 Oak St., Big Rapids, MI 49307-2020; or call 1-800-4-FERRIS (MI, IL, IN, OH, WI) or (616) 592-2100.

Ferris State University is an Equal Opportunity/Affirmative Action employer. The University complies with all applicable laws, including Title IX of the Education Amendments of 1972 and the Rehabilitation Act of 1973, which prohibit discrimination in employment, educational programs or admissions on the basis of age, sex, color, race, national origin, handicap, political affiliation or belief, or other prohibited matters. Inquiries or complaints may be addressed to: Affirmative Action and Title IX Compliance Office, Ferris State University, 420 Oak St., Big Rapids, MI 49307-2020.

Revised 1995



SECTION FOUR: DENTAL HYGIENE LICENSURE EXAMINATIONS

Michigan graduates are required to successfully pass the National Board Dental Hygiene Examination (NBDHE), and the Northeast Regional Board Examination (NERB), at a minimum score of 75% prior to licensure. In order to be eligible for both examinations, the student must be a graduate/graduating from an American Dental Association Accredited program. The national examination is administered by the ADA, and is a comprehensive written evaluation that covers all materials taught during the two year curriculum. The NERB contains two components: one is a computer generated examination and the second is a clinical evaluation on a patient that meets stated criteria. Both examinations are completed toward the end of Winter Semester prior to graduation.

It should be noted, not all graduates sit for either or both examinations. Graduates from other states/countries have rules and regulations that govern licensure that may be different than the Michigan criteria.

Results of both examinations are provided to the program. However, the regional examination scores are provided only upon written approval of each candidate acquired during the application process. The performance of FSU graduates for both examinations is provided below.

NBDHE*	<u>1995</u>	<u>1996</u>	<u>1997</u>
Candidates	45	50	54
Passed	44	50	48
Failed	1	0	6

NERB**	<u>1995</u>	<u>1996</u>	<u>1997</u>
Candidates	43	46	52
Passed	40	34	50
Failed	3	12	2

*National Board Dental Hygiene Examination

**Northeast Regional Board Examination

SECTION FIVE: ENROLLMENT TRENDS OVER THE PAST FIVE YEARS

The data for the enrollment/graduate trends comes from the Administrative Review of the Dental Hygiene Program.

Enrollment in the Dental Hygiene Program is strong and is expected to remain the same. Fall 1997, approximately 106 pre-dental hygiene students were in the process of completing eligibility requirements. Currently, 45 of the 60 seats for 1998 have been filled.

Fall of 1996 (three) and 1997 (five) additional students were accepted into the professional sequence above the quota of 60. The addition of students was made without increasing instructional costs.

Student retention is an ongoing concern for the program. The use of FSUS 100 and FSUS 101 courses, and SLA's for Dental Anatomy, Histology and Embryology and Pharmacology, have increased retention. The program continues to seek methods to enhance retention of students.

	<u>1993</u>	<u>1994</u>	<u>1995</u>	<u>1996</u>	<u>1997</u>
Enrollment on-campus (total)*	107	101	102	107	122
Freshman	3	16	14	5	3
Sophomore	36	21	32	30	39
Junior	43	33	44	43	47
Senior	25	21	22	24	33
Pre-Dental Hygiene	58	65	70	103	106

*Enrollment on-campus totals reflect all first and second year dental hygiene students on-campus. In some years, the freshman-senior breakdown is less, the lower number reflecting those students who have dual, B.S. degree status.

EVALUATION OF FACILITIES AND EQUIPMENT

Facilities used by the dental hygiene program are located in the Victor F. Spathelf Center for Allied Health (VFS). The areas used include: VFS 201 and VFS 204 - clinical laboratories are used for both preclinical experiences and clinical experience (patient treatment), VFS 203A-G - (7) radiography rooms, the x-ray developing darkroom, VFS 205 and VFS 207 locker rooms, VFS 203 - central instrument sterilization, VFS 203 - lab coat/laundry distribution, VFS 202 - patient reception area, VFS 327 - laboratory/resource area. All faculty/staff offices are located in Allied Health. Classroom instruction occurs in the Spathelf Center, the Instructional Resource Center (IRC) and the Pharmacy building.

Both VFS 201 and 204 are designed to provide patient care. There are 36 dental units (dental chairs, overhead lights, operator stools) in the room. Most of the units were installed in 1978, though some of them are even older, having been used when the dental clinics were located in the Swan building. The dental units are in use approximately 36-40 hours per week. The chairs have complex gear mechanisms and electrical connections that can break down. They are cleaned several times a day with the strong cleaning solutions required to maintain asepsis. Because of the complexity of the chairs' workings, their constant use and continual cleaning with strong chemical, we know that these units are reaching the end of their usefulness. The need for a plan to replace this equipment before repair parts get more difficult to obtain or they break down completely is recognized. Many parts of the ADEC dental unit delivery system are presently listed in the ADEC historical catalog indicating the difficulty of obtaining replacement parts.

In 1995, six mobile carts containing Spectrum light curing units and USI - ultrasonic scaling units were added to the clinic equipment. This almost doubled the number of both types of equipment available for student use.

The radiography area has been recently updated. Six Gendex-660 x-ray units were installed in 1995 and new patient chairs were installed in 1997. The chairs are designed to better accommodate special needs patients, including those in wheelchairs. The chair is adjusted with a foot control, therefore, it does not have to be touched by the clinician while x-rays are being taken. This feature improves the area's asepsis. An additional chair and x-ray unit have been purchased in anticipation of remodeling. There is also a General Electric panoramic x-ray machine that is 18 years old.

The radiography area has 10 DXTTR mannequin heads which students use to perfect taking x-rays before they take are allowed to take x-rays on patients. This area also houses the radiation monitoring badges that students are required to wear while working in the radiography area.

Clinic operations were computerized in 1995. Eight computers are networked with the dental practice management software. The software is a commercial dental practice management product. It has been adapted by Dental Hygiene to manage both patient records and student clinic performance records. Instructors do not use a keyboard to enter data. This system is unique because all data is assigned a bar code and is entered using portable optical scanners. We continue to incorporate more of the software's features into use. The most recent was the computerization of patient scheduling. At the time of our computerization, we were the only program in the country to have adapted this software and use bar codes. The software has since been installed in another dental hygiene program after their faculty visited Ferris and saw our system in operation.

There are four (4) wall mounted TV monitors in VFS 201 (the large dental hygiene clinic). The monitors can project images from a VCR, our intraoral camera, or a computer. This equipment is used frequently for student instruction. It can also be used for patient education.

Additional wall cabinets and counters were installed in 1996 to house the VCR, intraoral camera, and one of the clinic computers. The cabinets also increase the storage capacity for clinic supplies and other equipment. Another large cabinet was installed to hold the students' clinic instrument cassettes. This has improved the traffic flow for instrument distribution and increased supply storage space.

The clinic has 2 phase microscopes with TV monitors.

Students have access to two locker rooms/changing areas. Because students may not wear their clinic attire away from the dental hygiene clinic area, they must change into clinic clothes when they arrive for clinic. The locker room was designed to accommodate storage of students' belongings, but not necessarily as a changing room which is its greater need. The second changing area was created from a small clerical office at the time that male students started enrolling in the program. These changing areas get very crowded.

The lab coat/laundry distribution area is used to store and distribute student and instructor laboratory coats, which are laundered by Mecosta County General Hospital. Student lab coats are stored in closed cabinets. This area is also used by students to study x-rays.

Central Instrument Sterilization (VFS 203) is equipped with 3 autoclaves, a dry heat sterilizer, and large ultrasonic cleaner. It is in this area that all instrument sterilization occurs. Some of the students' instruments and all of the clinic instruments are dispensed from here. Impeccable standards of asepsis are imperative to the functioning of the clinic, and the central sterilization area is a critical element in maintaining these standards.

An additional laboratory located in VFS 327 is utilized during the year for dental hygiene courses. Fall semester, it is a primary laboratory for the dental materials class which teaches the dental hygiene second year about procedures and materials used in performing dental hygiene and dentistry procedures which are not taught in the clinical classes. In the Winter semester, the laboratory is used for Community Dentistry field experience class. Also, the lab is used as a location for DHYG 250, Pain Management for the Dental Hygienist, and tutoring sessions.

The laboratory is equipped with lab benches facilities for 20 students. Each lab bench area has a fixed light with both white light and fluorescent lighting, air outlets, and gas outlets. A chair and a drawer are part of each lab bench set-up.

In addition to lab benches, the room is equipped with a raised instructor demonstration lab bench station, two mobile carts, six wall mounted model trimmers located around the peripheral walls of the lab, one autoclave, one VFS monitor and player on a mobile cart (VHS), 2 VCR monitors and players on a mobile cart, one mobile plaster bin, 2 wall mounted plaster bins, periphery counter space for instrument and supply set-ups for the procedures taught, and draw and cabinet space for storing supplies and equipment.

In 1996, the program purchased a mobile cart equipped with a slide projector and laser pointer. This has become a very welcome addition. This cart was purchased with alumni funds.

Faculty/staff offices are located in VFS. The office of the Department Head is on the fourth floor, faculty and Clinical Dental Hygienists are on the third floor, and the Director of Clinical Education's is on the second floor. All offices have ample space for student advising. Each is equipped with a computer and printer.

DENTAL HYGIENE PROGRAM EQUIPMENT INVENTORY

Clinics

- 30 - Dental chairs with lights (VFS 202)
- 6 - Dental chairs with lights (VFS 204B)
- 36 - Operator stools
- 12 - Assistant/Instructor stools
- 5 - PC Computers
- 8 - Durawand portable optical scanners
- 2 - 4 port Durawand docking stations
- 40 - x-ray lighted viewing boxes
- Light Curing Units
 - 6 - Caulk Spectrum
 - 4 - DenMat
 - 1 - Caulk
- Ultrasonic scalers
 - 5 - Cavitron
 - 6 - USI
- Sonic scalers
 - 2 - Titan
 - 2 - Densonic

Sterilization Area (VFS 203)

- Autoclaves
 - 1 - Magnaclave
 - 2 - Pelton Crane
 - 1 - dry heat sterilizer
- Ultrasonic cleaners
 - 1 - L&R Ultrasonic cleaner - recessed
 - 2 - small ultrasonic cleaners

Radiography Area (VFS 203 A-G)

- 7 - Gendex 770 Intraoral x-ray units
- 1 - GE Panalipse
- 6 - Dental chairs
- 2 - AT 2000 x-ray processors
- 10 - DXTTR manikins

Reception Area (VFS 202)

- 2 - Desktop computers
- 2 - Typewriters
- 2 - Printers

Additional Equipment

Hand Instruments

400 - assorted hand instruments (e.g. Peridontal probes, mouth mirrors)

Handpieces

76 - Midwest Rhino slow speed motors

45 - Slow speed nose cones

57 - Right angle sheaths

81 - Right angle heads

7 - Contra angles

Ultrasonic tips

3 - P-100 Left 25K Universal

4 - P-100 Right 25K Universal

13 - P-100 25K Universal

12 - P-100 25K Universal w/outside water line

23 - 10 short tip w/outside water line

27 - P-10 short tip (sturdy)

4 - P-10 right (short)

7 - P-10 left (short)

3 - P-3 (short)

1 - P-1 (long)

3 - TFI-EWPP

Pulp Vitalometers

3 - Pulp testers

4 - tips

Supplemental Equipment in Clinic Area

Audiovisual equipment

1 - Intraoral camera w/VCR

2 - S-Video monitors

1 - VCR

4 - Sony TV monitors (wall mounted)

2 - Phase microscope w/monitor

1 - Dental Eye 35 mm camera

1 - Camcorder

Dental Materials Laboratory (VFS 327)

20 - mounted lights

20 - student lab bench stations

20 - lab bench chairs

1 - instructor lab bench

2 - instructor lab bench chairs

2 - mobile demonstration carts

6 - bench mounted model trimmers

1 - autoclave

1 - VCR monitor and player on a mobile cart (VHS)

2 - VCR monitors and players on mobile cart (1/2 inch)

Additional Instruments and Equipment (VFS 327)

- 3 - Amalgamators
- 10 - Mirrors
- 9 - Explorers
- 11 - Cotton Pliers
- 38 - Amalgam Carriers
- 43 - Large Condensers
- 32 - Small Condensers
- 19 - Plastic Filling Instruments
- 25 - Small Cleoid/Discoïd
- 14 - Large Cleoid/Discoïd
- 11 - Hollenback Carvers
- 10 - Ball/Egg Burnishers
- 22 - Matrix Retainers
- 35 - Contra-angles
- 23 - Cement Spatulas
- 5 - Small Rubber Bowls
- 27 - Medium Rubber Bowls
- 78 - Large Rubber Bowls
- 24 - Small Metal Spatulas
- 13 - Large Metal Spatulas
- 17 - Plastic Spatulas
- 5 - Large Scales
- 2 - Small Scales
- 52 - Jeltrate Water Measurers
- 58 - Jeltrate Water Measures
- 7 - Water Cylinders
- 6 - Gold Knives
- 20 - Wards Carvers

HEALTH SCIENCE LIBRARY RESOURCES

This is a partial list of library resources. A list of departmental texts, computer programs, and videos is being revised.

An Atlas of Dental Radiographic Anatomy, Kasle, 4th ed. (1993)

An Illustrated Guide to Dental Care for the Patient with Impaired Health, Grundy, Shaw, & Hamilton (1992)

Antibiotic/Antimicrobial Use in Dental Pracatice, Newman & Kornman (1990)

Boucher's Clinical Dental Terminology, 4th ed.

Color Atlas of Clinical Operative Dentistry, Crowns and Bridges, Grundy & Jones (1992)

Contemporary Oral Microbiology and Immunology, Slots & Taubman (1992)

Dental Hygiene Theory and Practice, Darby & Walsh (1994)

Dental Management of the Medically Compromised Patient, Little & Falace (1993)

Dentistry, Dental Practice and the Community, Burt & Eklund, 4th ed. (1992)

Elements of Dental Materials, Phillips & Moore, 5th ed. (1993)

Emergency Guide for Dental Auxiliaries, Chernega (1994)

Geriatric Dentistry: Aging and Oral Health by Papas, Niessen, and Chauncey (1991)

Handbook of Local Anesthesia, Malamed, 3rd ed. (1991)

Introduction to Dental Local Anesthesia, Evers and Haegerstam (1991)

Management of Temporomandibular Disorders and Occlusion, Okeson, 3rd ed. (1991)

Medical Emergencies in the Dental Office, Malamed, 4th ed. (1992)

Medical Problems in Dentistry, Scully (1993)

Oral Pathology: Clinical-Pathologic Correlations, Regezi & Sciubba (1993)

Practical Infection Control in Dentistry, Cottone, Terezhalmly & Molinari (1991)

Primary Preventive Dentistry, Harris & Christen (1991)

Principles of Oral Diagnosis, Coleman & Nelson (1993)

Radiographic Imaging for Dental Auxiliaries, Miles et al, 2nd ed.

Radiographic Interpretation for the Dental Hygienist, Haring & Lind (1993)

Restorative Dental Materials by Craig, 9th ed. (1993)

**DENTAL BIBLIOGRAPHY
(IRC, HEALTH SCIENCE LIBRARY, AND VFS)**

- CHARTS** Trigeminal Nerve Chart. Movocal Chemical Manufacturing Co., Inc., 1980
- KITS** The mouth in health and disease. Wayman Spence, Spenco Medical Corporation.
- MODELS**
- Human jaw model. Denoyer-Geppert Co., Chicago. ½ lower jaw, 1 incisor, 1 canine, 1 canine (unerupted), 1 molar, 1 stand, 1 guide.
- Human head model. Denoyer-Geppert Co. 1 head (in 2 halves), 1 section of cheekbone, 1 section of tongue.
- Human skull a la beauchene. CCM General Biological, Inc. 1 skull mounted in "exploded" position on metal standard, 1 metal base.
- Interproximal x-ray model. Densco. 3 teeth (movable) in clear base with reproduction of x-ray mounted behind.
- Jaw, anatomical model. Dansco. lower jaw on base with 7 teeth and hinged flap, 1 guide.
- Jaw, primary model. Densco. 1 upper jaw showing on one side teeth too badly decayed to fill, the other with Densco "Royal" stainless steel crowns.
- Jaw, primary model. Densco. 1 model of jaw of five year old child with first primary molar missing on each side. One side has stainless steel wire space loop fastened to a Densco "Royal" stainless steel crown, other side has similar loop fastened to stainless steel orthodontia band.
- Maxillary arch, mixed dentition. Densco. 1 nine year old mixed dentition maxillary arch, white plastic teeth, clear plastic gums.
- Adult human skull model. Clay-Adams, Inc. 1 skull with removable upper jaw, moveable lower jaw, and removable cranium top.
- Child's skull model. Clay-Adams, Inc. 1 skull with movable lower jaw and movable cranium top. Jaws, adult model. Hinged upper and lower jaw with examples of tooth decay, inflammation, plaque, etc.
- Human skull model. Gatesville, Texas, Medical Plastics Laboratory. Consists of one skull with bones of neck, with muscles and arteries molded in soft plastic.
- Human skull; dental education model. Medical Plastics Laboratory. Consists of skull with interchangeable upper and lower jaws showing normal dentition dissection and edentulous jaws.
- RECORDS** Dental Vocabulary. University of North Carolina, Extension Div., Bureau of Correspondence Instruction. 6 records

REALIA

Human Skull. Gatesville, Texas, Medical Plastics Laboratory. 1 skull dissected to show sinuses, roots of teeth, ear ossicles, nasal septum, etc. Nerves and blood vessels to teeth are simulated with nylon threads and muscle attachments are painted, labeled and coded on one side.

Human Skull - adult

Human Skull - adult - pulls apart, demo model

Human Skull - adult - muscle origins and bone painted on skull

Beauchene skull

Human half skeleton - divided into separate boxes

Human leg - minus pelvis bone

PHONOTAPES

The registered dietitian as team member in the diagnosis and management of dental problems. Carole A. Palmer. Audio Cassette Series, 1980.

Your medical records, who should see them? Chamber of Commerce US, 1979.

Assessing the nutritional status of the dental patient: A triphasic analysis. Cassette-a-month, 1978.

SLIDES

Allergy and oral changes due to drug therapy. American Dental Association, Council on Dental Therapeutics. 20 slides

Amalgam set-up. Ferris State University Audio Visual Department. 26 slides.

Basic set-up cavity classification and preparation. Ferris State University Audio Visual Department. 25 slides.

Benign soft tissues lesions and keratotic lesions chiefly local. American Dental Association, Council on Dental Therapeutics. 38 slides.

Bone lesions. American Dental Association, Council on Dental Therapeutics. 38 slides.

Characterized lucitone. Dental Supply Company of New York. 18 slides.

Basic dental health education for parents and teachers. American Dental Association, 1964. 57 slides.

Dental granuloma, odontogenic, sutural and soft tissue cysts. American Dental Association, Council on Dental Therapeutics. 22 slides.

Developmental anomalies, regressive alterations and stained teeth. American Dental Association, Council on Dental Therapeutics. 39 slides.

Hand-cutting instruments. Ferris State University Audio Visual Department. 24 slides (combined with 148P).

Hue-Lon Clinic. Dentists' Supply Company of New York. 39 slides.

Hypertrophy, hyperplasia and repair overgrowth. American Dental Association, Council on Dental Therapeutics. 12 slides.

Lesions of the salivary glands. American Dental Association, Council on Dental Therapeutics. 16 slides.

Malignant epithelial tumors, malignant mesenchymal tumors and metastatic tumors. American Dental Association, Council on Dental Therapeutics. 40 slides.

Muscles of mastication, facial expression, the tongue and anatomic landmarks of mandible and maxilla. Ferris State University Audio Visual Department. 51 slides.

Normal structures mistaken for disease processes. American Dental Association, Council on Dental Therapeutics. 14 slides.

Oral manifestations of bacterial, viral and mycotic infections. American Dental Association, Council on Dental Therapeutics. 37 slides.

Oral manifestations of blood diseases. American Dental Association, Council on Dental Therapeutics. 23 slides.

Oral manifestations of dermal lesions. American Dental Association, Council on Dental Therapeutics. 22 slides.

Oral manifestations of metabolic and deficiency changes. American Dental Association, Council on Dental Therapeutics. 20 slides.

Pathologic conditions of the mouth and jaws. American Dental Association. 20 slides.

Plastic instruments. Ferris State University Audio Visual Department. 10 slides.

Prophylaxis instruments. Ferris State University Audio Visual Department. 42 slides.

Propylaxis scalers. Ferris State University Audio Visual Department. 26 slides.

Pulp Pathology and Periodontal Disease. American Dental Association, Council on Dental Therapeutics. 20 slides.

Suggested Technique For Producing Trubyte Bio-blend Plastic Veneers and Bridgework. The Dentists' Supply Company of New York, 1966. 36 slides.

Trauma. American Dental Association, Council on Dental Therapeutics. 14 slides.

Tumors Of The Mouth. American Dental Association. 15 slides.

X-ray Interpretation. Dental Supply Co. of New York. 39 slides.

X-ray Interpretation: Anomalies and Pathology. Ferris State College Audio Visual Department. 91 slides.

X-rays: Interpretation and Technical and Processing Errors. Ferris State University Audio Visual Department. 78 slides.

Oral Pathology An Independent Learning Program. Peter A. Pullon.
Includes: Lesson 1 - Introduction to Pathology and the Nature of Disease.
Retrograde disturbances and cellular injury. 45 slides, 1 cass.

Lesson 2 - The Inflammatory Process. 33 slides, 1 cass.

Lesson 3 - Disturbances of Growth and Neoplasia. 36 slides, 1 cass.

Lesson 4 - Developmental Disturbances of Oral and Paraoral Structures -
Part 1. 48 slides, 1 cass.

Lesson 5 - Developmental Disturbances of Oral and Paraoral Structures -
Part 2. 58 slides, 1 cass.

Lesson 6 - Dental Stains and Accretions. 21 slides, 1 cass.

Lesson 7 - Dental Caries. 39 slides, 1 cass.

Lesson 8 - Pulp and Periapical Disease As Sequelae To Dental Caries.
25 slides, 1 cass.

Lesson 9 - Periodontal Disease - Part 1. 15 slides, 1 cass.

Lesson 10 - Periodontal Disease - Part 2. 20 slides, 1 cass.

Lesson 11 - Infectious Disease. 59 slides, 1 cass.

Lesson 12 - Oral Physical and Chemical Injuries. 23 slides, 1 cass.

Lesson 13 - Odontogenic Cysts and Tumors. 22 slides, 1 cass.

Lesson 14 - Oral Epithelial Tumors. 54 slides, 1 cass.

Lesson 15 - Oral Mesenchymal Tumors and Salivary Gland Lesions.
22 slides, 1 cass.

Phase Contrast Microscope. Ferris State University Audio Visual Department. 30 slides, 1 cass.

Sterilization By Moist Heat. Ferris State University Audio Visual Department.
27 slides, 1 cass.

Dental Hygiene Instruments. Ferris State University Audio Visual Department.
19 slides.

Vital Signs. Ferris State University Audio Visual Department. 35 slides, 1 cass.

Tooth Vitality Testing. Ferris State University Audio Visual Department. 22 slides, 1 cass.

X-ray Interpretation. Ferris State University Audio Visual Department. 58 slides.

Darkroom Procedures To Assure Diagnostic Quality Results. Rinn Company, 1968. 79 slides.

Extension Cone Paralleling Techniques. Rinn Company, 1968. 73 slides, 1 tape.

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Part 1 - X-ray Production and Radiographic Quality. 80 slides, 2 cass.

Part 2 - X-ray Production and Radiographic Quality. 8 slides.

Part 3 - Dental Radiological Health. 73 slides, 2 cass.

Part 13 - Bisecting the Angle. 64 slides, 1 cass.

Panelipse X-ray Unit. Ferris State University Audio Visual Dept., 1976. 63 slides, 1 cass.

Dental Occlusal Examination Techniques. Ferris State University Audio Visual Department, 1978. 53 slides, 1 cass.

Dental Posterior Bite-wing Radiographs. Ferris State University Audio Visual Department, 1978. 54 slides, 1 cass.

Extraoral Radiographic Interpretation. Ferris State University Audio Visual Department, 1978. 17 slides, key.

Interpretation of Mandibular Radiographic Landmarks. Ferris State University Audio Visual Department, 1977. 24 slides, 1 cass.

Interpretation of Maxillary Radiographic Landmarks. Ferris State University Audio Visual Department, 1977. 33 slides, 1 cass.

Intraoral Radiographic Interpretation. Ferris State University Audio Visual Department, 1978. 129 slides, key.

Lateral Jaw Radiographic Survey. Ferris State University Audio Visual Department, 1978. 24 slides, 1 cass.

Processing Pitfalls on Radiodontics. Eastman Kodak Company. 45 slides, 1 script.

Delton Pit and Fissure Sealant. Ferris State University Audio Visual Department, 1980. 16 slides, 1 cass.

The Nutritionist's Game Plan. 80 slides and audio cassette.

Dentistry For the Geriatric Patient. American Dental Association, 1977. 69 slides and guide.

Flossing Your Teeth. American Dental Association, 1977. 32 slides and guide.

Preventing Dental Disease. American Dental Association, 1979. 79 slides and guide.

The Progress of Tooth Decay. American Dental Association, 1979. 72 slides and guide.

The Progress of Periodontal Disease. American Dental Association, 1979. 64 slides and guide.

How To Tame Your Sweet Tooth. American Dental Association, 1979. 46 slides and guide.

Basic Dental Health Education For Schools. American Dental Association, 197? 60 slides and guide.

Dental X-ray Interpretation: Tooth Eruption and Shedding. Quercus Corporation, 1979. 27 slides and guide.

Hard Tissue Charting: Oral Structures. Ferris State University, Dept. of Allied Health, 1980. 65 slides and guide.

Teeth Health and Appearance. American Dental Association, 1980. 59 slides and guide.

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Part B - Mouth Diseases, Diagnosis

Part C - Mouth, Tumors

Differential Diagnosis of Oral Soft Tissue Pathosis: Morphology Unit.

Parts A & B - Elevated lesions

Parts C & D - Depressed and flat lesions

Differential Diagnosis of Oral Soft Tissue Pathosis: Color Unit.

Part A - Normal mucosa and pink lesions

Part B - Red, white and red & white lesions

Part C - Gray blue and purple lesions

Part D - Brown, black and yellow lesions

Part E - Translucent lesions, pre and post-tests

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Mishkin, David J. Normal Periodontium.

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Part 2 - Normal periodontium, periodontal ligament, cementum alveolar bone. College of Dental Medicine, Medical University of South Carolina, Chapel Hill, 1976. 34 slides, 1 cassette and guide.

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Neff, Peter A. Anatomic dissections of the TMJ from frontal and saggital views to understand the relationship of the individual tissues. Georgetown University. 20 slides and guide.

Neff, Peter A. The neuromuscular function and its interaction with occlusal morphology. Georgetown University, School of Dentistry, 1974. 50 slides and guide.

Neff, Peter A. Selective Grinding for Occlusal Stability. Georgetown University, School of Dentistry, 1973. 44 slides and guide.

The Mouth In Medicine. McGraw-Hill Institute for Continuing Physician Education, 1978. 130 slides and 1 cassette.

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Normal radiographic anatomy of mandibular periapical projections. UNC School of Dentistry, 1982. 60 slides, 1 cassette, script.

Normal radiographic anatomy of the panoramic projection of the maxillary and mandibular. UNC School of Dentistry, 1984. 132 slides, 2 cassettes, 2 scripts.

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CASSETTES**

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Ultrasonics in Dental Prophylaxis, Ferris State University Audio Visual Department, 1 cassette.

Dental Office Emergencies, Quercus Corp., 1976. 4 cassettes.

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Topical Fluoride Application, Ferris State University Audio Visual Department, 1976. 1 cassette.

Production and Properties of Images, Part 3, U of M School of Dentistry, 1974. 1 cassette.

Manipulation of Gypsum Products, Ferris State University Audio Visual Department, 1978. 1 cassette.

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Polishing Amalgams, Ferris State University Audio Visual Dept., 1978. 1 cassette.

Preparing an Acrylic Custom Tray, Ferris State University Audio Visual Department, 1978. 1 cassette.

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Recontouring, Finishing, and Polishing Restorations, Quercus Corporation, 1975.

Inferior Alveolar, Lingual and Buccal Nerve Block, Quercus Corp., 1979, V. 5
Local Infiltration, V. 1
Nasopalatine Nerve Block, V. 2
Anterior Palatine Nerve Block, V. 3
Posterior Superior Alveolar Nerve Block, V. 4

Curet Scalers, Mary Ann Hamel Hashimi, FSU.

Instrument Design, Fulcrum and Stroke, Mary Ann Hamel Hashimi, FSU.

Motor Driven Tooth Polishing, Mary Ann Hamel Hashimi, FSU.

Patient/Operator Seating and Illumination of the Mouth, Mary Ann Hamel Hashimi, FSU.

Periodontal Probing, Mary Ann Hamel Hashimi, FSU.

Right-Handed Operator Positioning and Instrumentation Sequence, Mary Ann Hamel Hashimi, FSU.

Sickle Scalers, Mary Ann Hamel Hashimi, FSU.

The XS-15 Hoe Scaler, Mary Ann Hamel Hashimi, FSU.

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DENTAL HYGIENE PROGRAM MEDIA

DMF Index - A Method of Surveying Caries
Dental Office Emergencies
Dental Stains and Accretions
The Diseased Root Surface, Part 1
The Diseased Root Surface, Part 2
Examination of the Mouth
Fundamental Skills for Instruments
Handwashing
Hard Tissue Charting: Oral Structures
Hoes, Files and Chisels
Instrument Design Fulcrum and Stroke
Instrument Sharpening
Maintenance of the Belt Driven Handpiece
Motor Driven Tooth Polishing
Nerb-Dental Hygiene Simulated Clinical
Normal Periodontium - Part 1
Northeast Regional Board D-H Examination
Nursing Caries Syndrome
Nuva-Seal
Oral Physiotherapy Aides I
Oral Physiotherapy Aides II
Oral Cancer Examination Procedures
Oral Cancer Screening
Oral Hygiene Index Simplified
Patient Management
Patient-Operator Seating/Illumination
Periodontal Charting Procedure
Periodontal Dental Hygienists' Role - Part 1
Periodontal Dental Hygienists' role - Part 2
Periodontal Management Therapy
Periodontal Probing
Phase Contract Microscope
Phase Microscope Monitor/plaque sample
Placement of Periodontal Dressing
Polishing Amalgams
Polishing, Fluoride Application, Probing
Porte Polisher
Preliminary Dental Examination
Prophylaxis Instruments
Recontouring/Finishing/Polishing Restorations
Removing Periodontal Dressing
Right-handed Operator Positioning/Instrum.

Sharpening Curets & Sickle Scalers

Sickle Scalers

Sterilization by Moist Heat

Tooth Vitality Testing

Topical Fluoride Application

Ultrasonics in Dental Prophylaxis

Vital Signs

The XS 15 Hoe Scaler

The Zerphing Chisel

SECTION SEVEN: LABOR MARKET ANALYSIS

DOCUMENTATION

Regardless of the source of information researched, the American Dental Association, the American Dental Hygienists Association, or government occupational handbooks, the bulk of current survey information appears to come from the American Dental Association's ongoing annual survey. This survey is sent to a random selection of 5% of all private practice practitioners and specialists, both ADA members and non-members, every year. It collects dental practice information including employed dental hygienists earnings and the projected dental hygiene job outlook. The report of the 1991-1995 survey information appeared in the May 1997 issue of the *Journal of the American Dental Association* compiled by V. Lazar entitled *Dental Hygienists in the United States: Results of an ADA Survey*.

Data also comes from a survey conducted by the American Dental Hygienists Association, results of which were reported in the October 1996 issue (Vol. 16 No. 10) of *Registered Dental Hygienist (RDH)*. Additional research comes from data generated by the 1990 census and the data analysis performed by the National Commission of Allied Health document entitled *Health Personnel in the United States: Ninth Report to Congress*. US Bureau of Labor Statistics, Michigan Occupational Information System (MOIS) data, May 1995 Michigan Employment Security Commission and the Ferris Career and Planning and Placement Services are additional sources. All sources will be identified.

EMPLOYMENT/EMPLOYMENT OPPORTUNITIES

NATIONALLY

In 1994 there were 126,700 dental hygienists employed, both part time and full time, nationally (*ADA Survey*, May, 1997). The industry distribution nationally is:

NATIONAL INDUSTRY DISTRIBUTION DENTAL HYGIENE

INDUSTRY	% EMPLOYED
Private dental offices/clinics	96.6
Government	1.2
Offices of physicians	1.0
Other	1.2

US Dept. of Labor, Bureau of Labor Statistics, 1993-94

Most dental hygienists work chair side in private dental offices and clinics, but a small percentage of hygienists are employed to provide dental hygiene services for patients in hospitals, nursing homes, public health clinics, and in the military. With additional or specialized education a few dental hygienists are employed as educators of dental hygiene students, in dental research, in business/office administration, and in marketing dentally related materials and equipment.

The total number of dental auxiliaries (dental hygienists, assistants, and laboratory technicians) employed by general dentists has risen from an average of 3.0 in 1983 to 3.5 positions in 1992. Employment opportunities in this field are excellent because nearly 70% of dentists employ at least one dental hygienist, and 33% employ two or more (*Allied Health and Rehabilitation Professions Education Directory 1996-97, AMA*).

Employment of dental hygienists is expected to grow much faster than the average for all occupations through the year 2005 in response to increasing demand for dental care. The increasing demand for dental care is attributed to overall population growth, and the greater retention of natural teeth by a growing number of middle-aged and elderly people (*Occupational Outlook Handbook, 1996-97 edition, US Dept. of Labor, Bureau of Labor Statistics*). The "baby boomers" who are going to attain the 55-65 year age group by the year 2005 will demonstrate the largest growth of all the age groups in the history of America. Because of increased consumer dental education and awareness and advances in medicine, this age group will have many individuals who seek routine dental care. Projections to the year 2005 of the group of individuals who will be over the age of 65 and requiring routine dental care is also on the rise. Growth projected in the dental hygiene profession from 1990 to 2005 is 41 % with 40,000 new jobs occurring (*Monthly Labor Review, US Bureau of Labor Statistics, November 1991*).

MICHIGAN

The Michigan industrial distribution is comparable to the national distribution, with an overwhelming majority of the dental hygiene jobs being found in the private dental office.

MICHIGAN'S EMPLOYMENT OUTLOOK TO 2005

EMPLOYMENT AND OUTLOOK REGIONS	(1994) NUMBER EMPLOYED	PERCENT GROWTH	PROJECTED YEARLY JOB OPENINGS
State Total	6,425	26.0%	270

Michigan Occupational Information System 1997, MOIS SCRIPT #166

The occupation of dental hygiene in the state of Michigan has a faster than average growth outlook (*Gross Projections, 1991-2005, US Bureau of Labor Statistics, Nov. 1991, and MOIS 1997*). An average of 270 job openings per year is expected with 150 due to growth and 120 due to replacement of those who retire, die, or leave the labor force for other reasons.

Need is attributed to the same indicators found at the national level, rising numbers of dentally educated middle age and elderly who are retaining their natural teeth, and the rise in overall population. Additionally, in Michigan, because of the auto industry and the number of other industries that are unionized, wide spread availability of dental care because of access through third party payment plans (dental insurance) is a factor of significance not seen in many other states.

SALARIES/SALARY POTENTIAL

Earnings of dental hygienists are affected by the type of employer, education level, experience of the individual, and geographic location. Hygienists who work in private dental offices are usually paid an hourly wage, although some are salaried or paid commissions for work performed. In addition to a bargained wage, some offices provide some or combinations of the following benefits: paid vacations, health insurance, dental work at cost for the employee and for the employees family, uniform allowances, continuing education benefits, and occasionally, profit sharing.

NATIONALLY

The American Dental Association (ADA) reports that the hourly national average salary for dental hygienists on a full or part-time basis among independent dentists employing dental hygienists is \$22.20 (*ADA Survey*, May 1995). On a full time basis, this equates to \$46,176 yearly.

According to The American Dental Hygienists 1996 readership Survey, the hourly national average salary is \$18.08, equating to \$37,619 yearly. The survey reports average annual incomes regionally (including part-time workers) as follows:

Pacific (AK, CA, HI, OR, WA)	\$45,000
Mountain (AZ, CO, ID, MT, NM, NV, UT, WY)	\$36,350
West North Central (IA, KS, MN, MO, ND, NE, SD)	\$32,000
East North Central (IL, IN, MI, OH, WI)	\$30,000
South Atlantic (DE, FL, GA, MD, NC, SC, VA, WV)	\$33,000
Mid Atlantic (NJ, NY, PA)	\$30,085
New England (CT, MA, ME, NH, RI, VT)	\$33,000
West South Central (AR, LA, OK, TX)	\$35,000
District of Columbia	\$43,575

Registered Dental Hygienist (RDH), October 1996

MICHIGAN

Dental hygienists in Michigan in 1997 earned an average annual income between \$24,432 and \$35,436 (Michigan Occupational Wage Information, Occupational Employment Statistics, MESO, May 1997).

The average of these incomes is \$29,934, which is comparable to the national RDH Survey of October 1996, but significantly lower than the national American Dental Association national salary data (*RDH*, October 1996, and *ADA Survey*, 1995).

FSU CAREER PLANNING AND PLACEMENT DATA

DEGREES GRANTED, PLACEMENT, AND BEGINNING SALARIES

The Ferris Career Planning and Placement Services provided a summary of placement and salaries gathered from graduates during the first five months after graduation. The table below summarizes the results of surveys collected following the 1992-93, 1993-94, 1994-95, 1995-96, and 1996-97 academic years for the dental hygiene program.

FSU DENTAL HYGIENE PLACEMENT DATA

	1992-1993	1993-1994	1994-1995	1995-1996	1995-96
# Degrees Granted	59	56	47	49	52
% Placed *	88	100	90	93.5	N/A***
Beginning Salary**	31,740	33,367	29,413	34,500	N/A

* number of graduates placed in jobs or further education on full-time basis

** average annual beginning salary

*** information not available

Placement of Ferris dental hygiene graduates continues to remain high. Beginning salaries are comparable with the Michigan averages and the national averages for this region.

POSITION ANNOUNCEMENTS

The Ferris Career Planning and Placement Services provided a summary of position announcements in the FSU weekly Job Placement Bulletin from May 1, 1995 through June 9, 1997. The information is summarized in the following table.

**DENTAL HYGIENE POSITION ANNOUNCEMENTS
MAY 1, 1995 - JUNE 9, 1997
FSU WEEKLY JOB PLACEMENT BULLETIN**

PERIOD OF TIME	# ANNOUNCEMENTS
May 1, 1995 - July 31, 1995	50
August 1, 1995 - October 31, 1995	7
November 1, 1995 - December 31, 1995	1
January 1, 1996 - March 31, 1996	6
April 1, 1996 - June 30, 1996	21
July 1, 1996 - September 30, 1996	7
October 1, 1996 - December 31, 1996	6
January 1, 1997 - June 9, 1997	17
TOTAL	115

Dental hygiene position announcements remain steady year around with the low announcement time being during the Thanksgiving to New Years period of time, and the high announcement time being during the period of time encompassing graduation and the beginning of summer.

SUMMARY

Although no sources have indicated a current job shortage in the field of dental hygiene, growth of job positions nationally and in the state of Michigan indicate current and projected statistically significant, steady increases.

Salaries in Michigan appear competitive with regional salaries, are significantly higher than the national RDH Survey average, and significantly lower than the national ADA Survey average.

SECTION EIGHT: PROGRAM PRODUCTIVITY COSTS

The productivity and costs data below is derived from documentation provided by the Office of Institutional Studies and is the most current data available. Data from 1992-93 was based on academic quarters while 1993-94 data was based on the semester system, the data between the years 1992-93 and 1993-94 is therefore not comparable.

Not all dental hygiene students are included in the data generated below, as some are dual degree students pursuing a bachelors degree in conjunction with dental hygiene.

Student Credit Hours				
<u>Year</u>	<u>Summer</u>	<u>Fall</u>	<u>Winter</u>	<u>F + W</u>
1993-94	0	1,216.00	887.00	2,103.00
1994-95	0	1,129.00	992.00	2,121.00
1995-96	6	1,268.00	1,024.00	2,292.00
1996-97	0	1,275.00	1,106.00	2,381.00

Student Credit Hours/FTEF				
<u>Year</u>	<u>Summer</u>	<u>Fall</u>	<u>Winter</u>	<u>F + W</u>
1993-94	0	200.86	143.32	343.55
1994-95	0	166.16	178.07	343.05
1995-96	0	219.44	170.89	389.46
1996-97	0	293.68	199.99	482.38

Personnel					
	<u>1993</u>	<u>1994</u>	<u>1995</u>	<u>1996</u>	<u>1997</u>
Tenure Track FTE	6	5	5	5*	5*
Overload supplemental FTEF	.12	1.18	.89	N/A	N/A

*During academic year 1996-97 and 1997-98, one faculty member was on sabbatical.

In addition to the five tenured faculty (one is the coordinator), three Clinical Dental Hygienists, a Clinical Laboratory Coordinator, and the Clinical Director make up the personnel for dental hygiene. Part time clinical instructors are utilized during both fall and winter semester.

During the fiscal restructuring in 1994, a Faculty/Program Director position was eliminated. A Program Coordinator position was developed with 25% release time, and currently a faculty member is in this 9-month position.

Financial							
<u>Expenditures*</u>	<u>FY92</u>	<u>FY93</u>	<u>FY94</u>	<u>FY95</u>	<u>FY96</u>	<u>FY97</u>	<u>FY98</u>
Supplies & Expense	39,499	26,441	26,170	17,129	16,325	18,641	15,900
Equipment**	1,175	1,600	20,000	24,677	25,727	30,172	62,004
Gifts and Grants	2,318	1,237	7,414	10,576	1,358	N/A	N/A

* Use end of fiscal year expenditures.

**Does not include VOC-Ed and General Fund dollars.

Since fiscal year 1994, clinic receipts from patient care have been used to support clinic operation. (Prior to that, receipts had been placed in the University General Fund). This has resulted in a reduction in program supply and expense costs. The receipts are used for clinic consumable supplies, i.e., gloves, masks, fluoride, x-ray film and processing chemicals, printing of clinic forms, telephone and postage charges, laundry, computer software support, and Hepatitis B vaccination for clinic employees. Product manufacturers have been generous in donating supplies such as toothpaste, mouthwash, and hand instruments. However, there has been some decrease in these donations recently, as the manufacturers have changed their marketing strategy.

The Dental Hygiene Program has benefited from Vocational Education for a number of years. In the last three years, \$117,000 has been awarded to the Dental Hygiene Program. The funds are used to update clinic equipment such as the refurbishing of the radiography area, clinic computerization, improving equipment in the central sterilization area, and purchase of ultrasonic scalers. The annual distribution of Vocational Education funds is variable based on identified academic, financially and physically disadvantaged students. This includes displaced homemakers, single parents, high school GPA's below 2.0, and Pell Grant recipients.

Continuing education profits have provided funds for faculty enrichment, and to purchase computers and printers for dental hygiene faculty and staff.

The Delta Dental Fund has donated \$2,250 each of the last three years to support two Allied Dental Department projects: student scholarships and dental hygiene treatment for clients from the MOARC Center (adult sheltered workshop).

SECTION NINE: STUDENT PERCEPTION OF THE PROGRAM

Survey

Surveys were developed for both first and second year dental hygiene students. The survey was administered on-campus during April of 1997.

The survey form was designed to evaluate skill level development, instructors, clinical evaluation, and how the academic course work was integrated with the clinical learning experiences.

Several student comments have been used to modify and make changes that have been implemented during Fall Semester 1997.

Clinical course instructors were evaluated by students. The results are privately shared with each faculty member.

Results

Describe the strongest aspects of the Dental Hygiene program:

I feel the Radiology course was excellent!

I think I learned a great deal and I am more knowledgeable about the dental field.

I gained something unique from each individual instructor; they each had their special strong points.

Good instructors.

Have a strong concept of clinical experience.

Some teachers really have your best interest in mind. (2)

The clinical preparation by clinical instructors. (7)

It prepared us well. (2)

Student bonding got me through.

How things were drilled into us about certain things; we are leaving with a lot of knowledge.

Preparation for National and State exams. (3)

Discipline and classroom instruction.

Friendship and teamwork!!

Excellent reception area; most instructors explain things very well.

FSU made me feel well prepared for my exams; the learning experience. Good job to all!!

The tests!

Everyone works as a team.

When I went to Chicago review, the whole lecture seemed real basic.

When you did receive one-on-one, you received excellent instruction.

Within the program itself, students, faculty, and staff are very helpful and personable. I have never experienced a problem with any instructors.

Professionalism of professors and instructors who care about the students.

Well known!

Age variety and social public, i.e., kids, young adults, old, MOARC.

The willingness of staff to work with you.

Describe the weakest aspects of the Dental Hygiene program and suggest how they can be remediated:

One-on-one instruction; radiographic interps. were hard to get done. There are not enough instructors for one-on-one help. They don't have enough time to sit and help us.
There needs to be more instructors or less students. (18)
Fairness!! Equal distribution of duties and on grading.
I hate all the forms and worrying about them getting lost. I just can't think of a solution.
Patient availability. (2)
There should be a special time to do process evaluations.
How students are treated by faculty.
Have the same clinical coordinator from 1st to 2nd year.
Too little time, too many requirements. (2)
Lack of ethical or professional attitudes. (2)
Instructors just doing checks, not actually teaching students.
I didn't like the way the evaluations were done. You always had to seek out an instructor and everyone is always busy.
Holding summer clinics would help the transition. (3)
The weakest aspect was the time wasted waiting for instructor checks.
Communication!!!

If any components in this survey are rated 4 or 5 (disagree/strongly disagree), please explain why:

I never had those instructors.
Again, it goes to fairness. If you are letting one person do something, everyone should be able to do it. I feel some instructors had favorites.
Instructor time with students is very limited. (2)
We didn't get any harder cases in DHYG 125.
Overall, my experience at Ferris was one of personal growth in communicating and clinical situations. I am very pleased!!!
I think the instructors became too involved with students' personalities and gossip.
Waiting 30-60 minutes for an instructor check.
First year is not hard enough to prepare for the second year. The summer break is too long.
We need a summer clinic.

FIRST YEAR DENTAL HYGIENE QUESTIONNAIRE

In order for you to collect 5 bonus points to be applied to fall semester, your test number must be included. The results will not be reviewed until after the semester is over. Please be honest as improvements can not be addressed unless they are brought to our attention. This evaluation has been designed to assist the faculty in improving course design. Please answer all questions.

Please use the following scale:

1. Strongly agree (SA)
2. Agree (A)
3. Neither agree nor disagree (N-A-D)
4. Disagree (D)
5. Strongly disagree (SD)

	SA	A	N-A-D	D	SD
1. The level of skill development attained in DHYG 114 lab was satisfactory preparation for my winter semester clinical experience.	18	32	2	1	0
2. The requirements for DHYG 114 were clearly stated in the syllabus.	31	17	4	1	0
3. The requirements for DHYG 125 were clearly stated in the syllabus.	24	22	3	2	2
4. In most instances, instructors were available during clinic for individualized instruction.	8	20	12	7	6
5. On the whole, I feel that clinic faculty have fairly evaluated my clinical performance.	20	26	3	3	1
6. I feel the number of hours of clinical practice was appropriate to achieve competence.	18	25	5	5	0
7. Academic course work in DHYG 112 was well integrated with my clinical learning experiences.	19	26	6	1	1
8. Academic course work in DHYG 124 was well integrated with my clinical learning experiences.	15	33	3	0	2
9. Academic course work in DHYG 126 was well integrated with my clinical learning experiences.	16	26	6	1	1
10. Academic course work in DHYG 136 was well integrated with my clinical learning experiences.	15	26	8	2	1
11. Academic course work in DHYG 228 was well integrated with my clinical learning experiences.	21	25	4	0	3
12. Academic course work in CAHS 231 was well integrated with my clinical learning experiences.	10	28	8	4	3

SECOND YEAR DENTAL HYGIENE QUESTIONNAIRE RESULTS

This evaluation has been designed to assist the faculty in improving course design. Please answer all questions.

Please use the following scale:

1. Strongly agree (SA)
2. Agree (A)
3. Neither agree nor disagree (N-A-D)
4. Disagree (D)
5. Strongly disagree (SD)

	SA	A	N-A-D	D	SD
1. The level of skill development attained in DHYG 125 lab was satisfactory preparation for fall/winter semester clinical experience in second year.	10	17	4	5	0
2. The DHYG 215 course content provided an adequate preparation for my winter semester clinical experience.	9	18	6	3	0
3. The requirements for DHYG 215 were clearly stated in the syllabus.	10	15	7	2	1
4. The requirements for DHYG 225 were clearly stated in the syllabus.	12	14	5	4	1
5. In most instances, instructors were available during clinic for individualized instruction.	1	13	7	8	7
6. On the whole, I feel that clinic faculty have fairly evaluated my clinical performance.	6	15	8	6	1
7. I feel the number of hours of clinical practice was appropriate to achieve competence.	9	13	11	3	0
8. Academic course work was well integrated with clinical learning experiences.	6	20	6	3	1
9. Academic course work in DHYG 211 was well integrated with my clinical learning experiences.	5	20	8	3	0
10. Academic course work in DHYG 214 was well integrated with my clinical learning experiences.	5	18	8	5	0
11. Academic course work in DHYG 223 was well integrated with my clinical learning experiences.	5	18	9	4	0
12. Academic course work in DHYG 226 was well integrated with my clinical learning experiences.	5	19	7	5	0
13. Academic course work in DHYG 230 was well integrated with my clinical learning experiences.	6	18	8	4	0

PLEASE EVALUATE THE FACULTY AND STAFF ON THEIR EFFECTIVENESS IN PROVIDING INSTRUCTION, ASSISTANCE AND FEEDBACK.

1 - Excellent 2 - Good 3 - Fair 4 - Poor 5 - Didn't work with him/her

14.	Sidney	12	6	10	6	2
15.	Jackson	19	15	0	1	1
16.	Collins	17	15	3	1	0
17.	Hansen	8	12	4	1	11
18.	Myers	12	12	3	1	8
19.	Meeuwenberg	18	10	6	1	1
20.	Peters	15	11	5	5	0
21.	Garlick	11	7	7	1	0
22.	Stolberg	25	8	0	1	1
23.	Turcotte	8	6	2	1	19
24.	Wolfer	17	13	2	1	2
25.	Foster	18	12	5	1	0
26.	Schoettle	22	10	0	1	3
27.	Danette Boyd	21	9	5	1	0
28.	Kathy Hess	21	10	4	1	0

SECTION TEN: FACULTY PERCEPTIONS OF THE DENTAL HYGIENE PROGRAM

The Dental Hygiene Program faculty were given a survey to complete. The survey was completed in August of 1997.

The survey and data are attached. The comments from each question are provided below:

1. We have used many different documents over the years.
- 2.
3. Needs improvement
- 4.
5. We need to survey the market regularly
- 6.
7. Use of this data needs improvement
8. Almost to much individual attention in some cases
9. A review should occur annually - not coordinated for the most part
10. A full-time program director is needed for this to be accomplished
- 11.
- 12.
13. Needs improvement
14. Program has not had much experience with this area
- 15.
- 16.
- 17.
- 18.
19. Taught as part of a course during second year of the program
- 20.
- 21.

22. Not enough time to complete.
We need a full-time director for this to be done well
23. Major problem since the CAHS restructuring occurred.
Clarification of this is ongoing.
24. Administrators must define roles, duties, and responsibilities to the group.
25. Historically, full-time director and faculty positions have been consistently removed and replaced with clinical hygienist positions.
26. Variety of skills, some faculty have not practiced in a wet environment in years. Many faculty staff are not involved in their professional organizations.
27. Funding seem to be a constant issue.
28. SLA labs have been helpful.
Tutor time available has helped.
29. Another sacrifice due to restructuring.
Reception area needs additional staffing.
30. Could be more current
Need new equipment
- 31.
32. Equipment replacement in clinic needs to occur for safety to students and patients.
- 33.
- 34.
- 35.
- 36.
37. Budget is always less than requested.
- 38.

What are the educational strengths of the Dental Hygiene Program?

Faculty have several years teaching experience.

All tenured faculty have masters degrees

Strong student advising.

The clinical dental hygienists have current clinical experience.

Faculty and staff dedication to the students and program

Dedication to teaching and safety issues for the students.

What are the major needs for improvement in the Dental Hygiene Program? What action is requires to achieve these improvements?

Replace the chairs/light units in the dental hygiene clinic.

Calibration amongst faculty/staff in teaching and evaluating clinical course.

Curriculum revisions need to be addressed and not put off.

Need additional professional development activities for teaching staff, including part time staff and new hires.

Time needs to be devoted to student recruitment.

FACULTY PERCEPTIONS OF THE DENTAL HYGIENE EDUCATION PROGRAM SURVEY RESULTS 1997

INSTRUCTIONS TO RESPONDENTS

On the following pages, you are asked to give your perceptions of dental hygiene, such as goals and objectives, processes, and resources. Rate each item by checking your best judgment on a five point scale ranging from poor to excellent. Only check one answer per item. A "Don't Know" column has been provided in the event you really don't have sufficient information to rate an item. Space has been provided for you to note comments that may help to clarify your ratings, or to indicate modifications of a standard to make it more relevant for your program.

Criteria for excellent and poor ratings are provided for each item. *Excellent* represents a nearly ideal or exemplary situation; *poor*, one of a serious inadequacy. As a guide, ratings may be made with the following in mind:

EXCELLENT means ideal, top 5 to 10%
GOOD is a strong rating, top 1/3rd
ACCEPTABLE is average, the middle 1/3rd
BELOW EXPECTATIONS is only fair, bottom 1/3rd
POOR is seriously inadequate, bottom 5 to 10%

This form may be completed as a *consensus* evaluation by the principal persons involved with a specific occupational program. Examples of such persons would be instructors, department or division chairpersons, program coordinators, and administrators such as occupational dean. If preferred, respondents may complete individual forms.

To help with tabulation of responses, please provide the information requested below before completing your rating.

	Poor 1	Below Expectations 2	Acceptable 3	Good 4	Excellent 5	Don't Know	Comments
GOALS AND OBJECTIVES							
1. Program Goals <u>Excellent</u> - Written goals for this program state realistic outcomes (such as planned enrollments, completions, placements) and are used as one measure of program effectiveness. <u>Poor</u> - No written goals exist for this program.			1	1	2	1	We have used many different documents over the years.
2. Course Objectives <u>Excellent</u> - Written measurable objectives have been developed for all occupational courses in this program, and are used to plan and organize instruction. <u>Poor</u> - No written objectives have been developed for courses in this program.			1	3	1	1	

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	Poor 1	Below Expectations 2	Acceptable 3	Good 4	Excellent 5	Don't Know	Comments
<p>3. Competency Based Performance Objectives</p> <p><u>Excellent</u> - Competency based performance objectives are on file in writing, consistent with employment standards, and tell students what to expect and help faculty pace instruction.</p> <p><u>Poor</u> - Competency based performance objectives have not been developed for courses in this program.</p>		1	1	3			Needs improvement
<p>4. Use of Competency Based Performance Objectives</p> <p><u>Excellent</u> - Competency based performance objectives are distributed to students and used to assess student progress.</p> <p><u>Poor</u> - Competency based performance objectives are not used with students for progress evaluation nor are students aware that they exist.</p>		1		3	1		
<p>5. Use of Information on Labor Market Needs</p> <p><u>Excellent</u> - Current data on labor market needs and emerging trends in job openings are systematically used in developing and evaluating this program.</p> <p><u>Poor</u> - Labor market data is not used in planning or evaluation.</p>		3		2			We need to survey the market regularly.
<p>6. Use of Profession/Industry Standards</p> <p><u>Excellent</u> - Profession/industry standards (such as licensing, certification, accreditation) are consistently used in planning and evaluating this program and content of its courses.</p> <p><u>Poor</u> - Little or no recognition is given to specific profession/industry standards in planning and evaluating this program.</p>				1	4		
<p>7. Use of Student Follow-Up Information</p> <p><u>Excellent</u> - Current follow-up data on completers and leavers (students with marketable skills) are consistently and systematically used in evaluating this program.</p> <p><u>Poor</u> - Student follow-up information has not been collected for use in evaluating this program.</p>		1	1	2		1	Use of this data needs improvement
<p>PROCESSES</p> <p>8. Adaptation of Instruction</p> <p><u>Excellent</u> - Instruction in all courses required for this program recognizes and responds to individual student interests, learning styles, skills, and abilities through a variety of instructional methods (such as small group or individualized instruction, laboratory or "hands on" experiences, open entry/open exit, credit by examination).</p> <p><u>Poor</u> - Instructional approaches in this program do not consider individual student differences.</p>		1		3	1		Almost to much individual attention in some cases.

	Poor 1	Below Expectations 2	Acceptable 3	Good 4	Excellent 5	Don't Know	Comments
<p>9. Relevance of Supportive Courses <u>Excellent</u> - Applicable supportive courses (such as anatomy and physiology, technical communications, technical mathematics) are closely coordinated with this program and are kept relevant to program goals and current to the needs of students. <u>Poor</u> - Supportive course content reflects no planned approach to meeting needs of students in this program.</p>		2	1	2			A review should occur annually, NOT coordinated for the most part.
<p>10. Coordination with Other Community Agencies and Educational Programs <u>Excellent</u> - Effective liaison is maintained with other programs and educational agencies and institutions (such as high schools, other community colleges, four year colleges, area vocational schools, proprietary schools, CETA) to assure a coordinated approach and to avoid duplication in meeting occupational needs of the area or community. <u>Poor</u> - College activities reflect a disinterest in coordination with other programs and agencies having impact on this program.</p>			1	1	2	1	A full-time program director is needed for this to be accomplished.
<p>11. Provision for Work Experience, Cooperative Education, or Clinical Experience <u>Excellent</u> - Ample opportunities are provided for related work experience, cooperative education, or clinical experience for students in this program. Student participation is well coordinated with classroom instruction and employer supervision. <u>Poor</u> - Few opportunities are provided in this program for related work experience, cooperative education, or clinical experience where such participation is feasible.</p>				1	4		
<p>12. Program Availability and Accessibility <u>Excellent</u> - Students and potential students desiring enrollment in this program are identified through recruitment activities, treated equally in enrollment selection, and not discouraged by unrealistic prerequisites. The program is readily available and accessible at convenient times and locations. <u>Poor</u> - This program is not available or accessible to most students seeking enrollment. Discriminatory selection procedures are practiced</p>				3	2		

	Poor 1	Below Expectations 2	Acceptable 3	Good 4	Excellent 5	Don't Know	Comments
<p>13. Provision for the Disadvantaged <u>Excellent</u> - Support services are provided for disadvantaged (such as socioeconomic, cultural, linguistic, academic) students enrolled in this program. Services are coordinated with occupational instruction and results are assessed continuously. <u>Poor</u> - No support services are provided for disadvantaged students enrolled in this program.</p>		1	2		1	1	Needs improvement
<p>14. Provision for the Handicapped <u>Excellent</u> - Support services are provided for handicapped (physical, mental, emotional, and other health impairing handicaps) students enrolled in this program. Facilities and equipment adaptations are made as needed. Services and facilities modifications are coordinated with occupational instruction and results are assessed continuously. <u>Poor</u> - No support services or facilities and equipment modifications are available for handicapped students enrolled in this program.</p>			1	1	1	2	Program has not had much experience with this area.
<p>15. Efforts to Achieve Sex Equity <u>Excellent</u> - Emphasis is given to eliminating sex bias and sex stereotyping in this program: staffing, student recruitment, program advisement, and career counseling; access to and acceptance in programs; selection of curricular materials; instruction; job development and placement. <u>Poor</u> - Almost no attention is directed toward achieving sex equity in this program.</p>			1	2	2		
<p>16. Provision for Program Advisement <u>Excellent</u> - Instructors or other qualified personnel advise students (day, evening, weekend) on program and course selection. Registration procedures facilitate course selection and sequencing. <u>Poor</u> - Instructors make no provision for advising students on course and program selection.</p>				3	2		Computer access is sometimes a problem during advising times.
<p>17. Provision for Career Planning and Guidance <u>Excellent</u> - Day, evening, and weekend students in this program have ready access to career planning and guidance services. <u>Poor</u> - Little or no provision is made for career planning and guidance services for students enrolled in this program.</p>					3	2	

	Poor 1	Below Expectations 2	Acceptable 3	Good 4	Excellent 5	Don't Know	Comments
<p>18. Adequacy of Career Planning and Guidance <u>Excellent</u> - Instructors or other qualified personnel providing career planning and guidance services have current and relevant occupational knowledge and use a variety of resources (such as printed materials, audiovisuals, job observation) to meet individual student career objectives. <u>Poor</u> - Career planning and guidance services are ineffective and staffed with personnel who have little occupational knowledge.</p>			1	1	3		
<p>19. Provision for Employability Information <u>Excellent</u> - This program includes information which is valuable to students as employees (on such topics as employment opportunities and future potential, starting salary, benefits, responsibilities and rights). <u>Poor</u> - Almost no emphasis is placed on providing information important to students as employees.</p>			1	1	3		Taught as part of a course during senior year.
<p>20. Placement Effectiveness for Students in this Program <u>Excellent</u> - The college has an effectively functioning system for locating jobs and coordinating placement for students in this program. <u>Poor</u> - The college has no system or an ineffective system for locating jobs and coordinating placement for occupational students enrolled in this program.</p>			1	2	2		
<p>21. Student Follow-Up System <u>Excellent</u> - Success and failure of program leavers and completers are assessed through periodic follow-up studies. Information learned is made available to instructors, students, advisory committee members, and others concerned (such as counselors) and is used to modify this program. <u>Poor</u> - No effort is made to follow up former students of this program.</p>			3	2			
<p>22. Promotion of the Dental Hygiene Program <u>Excellent</u> - An active and organized effort is made to inform the public and its representatives (such as news media, legislators, board, business community) of the importance of providing effective and comprehensive occupational education and specific training for this occupation to gain community support. <u>Poor</u> - There is no organized public information effort for this program.</p>			2	2	1		Not enough time to complete. We need a full-time director for this to be done well.

	Poor 1	Below Expectations 2	Acceptable 3	Good 4	Excellent 5	Don't Know	Comments
RESOURCES							
<p>23. Provision for Leadership and Coordination <u>Excellent</u> - Responsibility, authority, and accountability for this program are clearly identified and assigned. Administrative effectiveness is achieved in planning, managing, and evaluating this program. <u>Poor</u> - There are no clearly defined lines of responsibility, authority, and accountability for this program.</p>	1		2	2			Major problem since CAHS restructuring occurred. Clarification of this is ongoing.
<p>24. Qualifications of Administrators and/or Supervisors <u>Excellent</u> - All persons responsible for directing and coordinating this program demonstrate a high level of administrative ability. They are knowledgeable in and committed to occupational education. <u>Poor</u> - Persons responsible for directing and coordinating this program have little administrative training, education, and experience.</p>		1	1	3			Administrators must define roles, duties, and responsibilities to the group.
<p>25. Instructional Staffing <u>Excellent</u> - Instructional staffing for this program is sufficient to permit optimum program effectiveness (such as through enabling instructors to meet individual student needs, providing liaison with advisory committees, and assisting with placement and follow-up activities). <u>Poor</u> - Staffing is inadequate to meet the needs of this program effectively.</p>	1			1	3		Historically, full-time director and faculty positions have been consistently removed and replaced with clinical hygienist positions.
<p>26. Qualifications of Instructional Staff <u>Excellent</u> - Instructors in this program have two or more years in relevant employment experience, have kept current in their field, and have developed and maintained a high level of teaching competence. <u>Poor</u> - Few instructors in this program have relevant employment experience or current competence in their field.</p>		1	1	1	2		Variety of skills some faculty have not practiced in a "wet" environment in years. Many faculty/staff are not involved in their professional organizations.

	Poor 1	Below Expectations 2	Acceptable 3	Good 4	Excellent 5	Don't Know	Comments
<p>27. Professional Development Opportunities</p> <p><u>Excellent</u> - The college encourages and supports the continuing professional development of faculty through such opportunities as conference attendance, curriculum development, work experience.</p> <p><u>Poor</u> - The college does not encourage or support professional development of faculty.</p>		1		2	2		Funding seems to be a constant issue.
<p>28. Use of Instructional Support Staff</p> <p><u>Excellent</u> - Paraprofessionals (such as aides, laboratory assistants) are used when appropriate to provide classroom help to students and to ensure maximum effectiveness of instructors in the program.</p> <p><u>Poor</u> - Little use is made of instructional support staff in this program.</p>		1		2	2		SLA labs have been helpful. Tutor time available has helped.
<p>29. Use of Clerical Support Staff</p> <p><u>Excellent</u> - Office and clerical assistance is available to instructors in this program and used to ensure maximum effectiveness of instructors.</p> <p><u>Poor</u> - Little or no office and clerical assistance is available to instructors; ineffective use is made of clerical support staff.</p>		1		1	3		Another sacrifice due to restructuring. Reception area needs additional staffing.
<p>30. Adequacy and Availability of Instructional Equipment</p> <p><u>Excellent</u> - Equipment used on or off campus for this program is current, representative of that used on jobs for which students are being trained, and in sufficient supply to meet the needs of students.</p> <p><u>Poor</u> - Equipment for this program is outmoded and in insufficient quantity to support quality instruction.</p>			1	2	2		Could be more current; need new equipment.
<p>31. Maintenance and Safety of Instructional Equipment</p> <p><u>Excellent</u> - Equipment used for this program is operational, safe, and well maintained.</p> <p><u>Poor</u> - Equipment used for this program is often not operable and is unsafe.</p>				1	4		
<p>32. Adequacy of Instructional Facilities</p> <p><u>Excellent</u> - Instructional facilities (excluding equipment) meet the program objectives and student needs, are functional and provide maximum flexibility and safe working conditions.</p> <p><u>Poor</u> - Facilities for this program generally are restrictive, dysfunctional, or overcrowded.</p>		1		3	1		Equipment replacement in the clinic needs to occur for safety to students and patients.

	Poor 1	Below Expectations 2	Acceptable 3	Good 4	Excellent 5	Don't Know	Comments
<p>33. Scheduling of Instructional Facilities</p> <p><u>Excellent</u> - Scheduling of facilities and equipment for this program is planned to maximize use and be consistent with quality instruction.</p> <p><u>Poor</u> - Facilities and equipment for this program are significantly under- or over-scheduled.</p>			1	2	2		
<p>34. Adequacy and Availability of Instructional Materials and Supplies</p> <p><u>Excellent</u> - Instructional materials and supplies are readily available and in sufficient quantity to support quality instruction.</p> <p><u>Poor</u> - Materials and supplies in this program are limited in amount, generally outdated, and lack relevance to program and student needs.</p>			1	2	2		Supplies frequently are not ordered soon enough for use.
<p>35. Adequacy and Availability of Learning Resources</p> <p><u>Excellent</u> - Learning resources for this program are available and accessible to students, current and relevant to the occupation, and selected to avoid sex bias and stereotyping.</p> <p><u>Poor</u> - Learning resources for this program are outdated, limited in quantity, and lack relevance to the occupation.</p>			1	2	1	1	
<p>36. Use of Advisory Committees</p> <p><u>Excellent</u> - The advisory committee for this program is active and representative of the occupation.</p> <p><u>Poor</u> - the advisory committee for this program is not representative of the occupation and rarely meets.</p>			1	3	1		
<p>37. Provisions in Current Operating Budget</p> <p><u>Excellent</u> - Adequate funds are allocated in the college operating budget to support achievement of approved program objectives. Allocations are planned to consider instructor budget input.</p> <p><u>Poor</u> - Funds provided are seriously inadequate in relation to approved objectives for this program.</p>		1	1	2		1	Budget is always less than requested.

	Poor 1	Below Expectations 2	Acceptable 3	Good 4	Excellent 5	Don't Know	Comments
<p>38. Provisions in Capital Outlay Budget for Equipment</p> <p><u>Excellent</u> - Funds are allocated in a planned effort to provide for needed new equipment and for equipment replacement and repair, consistent with the objectives for this program and based on instructor input.</p> <p><u>Poor</u> - Equipment needs in this program are almost totally unmet in the capital outlay budget.</p>	1		1	1		1	
<p>ADDITIONAL STANDARDS IDENTIFIED BY COLLEGE</p> <p>39.</p>							
40.							
41.							
42.							
43.							

What are the chief education strengths of your program?

Faculty have several years of teaching experience.

All faculty have a Master's degree

Strong student advising

Current clinical experience of the clinical dental hygienists

Faculty and staff dedication to the students and program

Dedication to teaching and safety issues for the students

What are the major needs for improvement in your program, and what action is required to achieve these improvements?

The administration within the department often have difficulty working together.

Administration needs to define their job responsibilities to the program.

Replace the dental chairs and units in the dental hygiene clinic. (5)

Calibration amongst faculty/staff in teaching and evaluating clinical courses. (2)

Need additional professional development activities for teaching staff, including part time staff and new hires.

Improve communication and teach work of faculty/staff to ensure student outcomes.

Need additional part-time staff to ensure we have a full teaching staff for each clinic.

Need a full-time program director. Many things remain undone (i.e., recruitment, program promotion) because there isn't enough time.

Curriculum revisions need to be addressed and not put off. (2)

Time needs to be devoted to student recruitment.

SECTION ELEVEN: SURVEY OF PROGRAM GRADUATES

Over the summer of 1997, survey was sent to 112 graduates within the State of Michigan. Graduates of the Ferris State University Dental Hygiene Program were asked to complete and return the survey. Sixteen completed surveys were returned.

RESULTS

The majority of the respondents (87.5%) are employed in a private practice dental office. The remaining respondents (2) are practicing in a private dental office and continuing education toward an advanced degree, while the second is employed by a Health Department. The majority work 33-40 hours weekly.

Comments related to the following questions were noted.

Please list any strengths and/or weaknesses about the entire program (consider specific courses and content, level of instruction, sequence of courses, patient experiences, equipment, faculty, staff, professionalism, student organizations, SADHA & Pi Delta Alpha, etc.).

More periodontal experience, especially root planing and scaling. More instruction on how to do sealants.

The program should purchase a prophylaxis jet; I now use this on a daily basis.

Pharmacology needs improvement.

Pharmacology needs to be condensed into medications that will affect our treatment plan. We don't need to know how every drug made affects people. We're not pharmacists. I learned little from that course.

Need uniform methods when instructing students.

Overall, I felt the instructors helped prepare us for boards! I don't feel that those students who don't meet the requirements should be readmitted or remain in the program. They usually don't pass the boards and they give the school a bad reputation. They don't go on to become good students or good hygienists if they're allowed to squeeze on through; it's not fair to the other students who try to keep their grades up.

All of the faculty and staff were great. Most were approachable if you had any questions.

The instructors are incredible!

Dental materials class really doesn't pertain to what a dental hygienist does on a day to day basis.

I felt dental specialties was not important enough to focus an entire class on it. I also felt community dentistry was under emphasized.

Please identify the most underused and costly item that you purchased for use in the program.

Ultrasonic tip - very expensive and I only used it once. (6)

Files

3rd instrument cassette (2)

Sharpening guide (2)

Steri-tube (2)

Textbooks/manuals for courses were used more than textbooks/purchasing books; could have been avoided for some courses.

Please list the textbooks you used the most or were the most helpful to you.

Dental Anatomy (2)

Periodontal (2)

Radiology (4)

Wilkins (4)

Oral Pathology (5)

Study guides and manual issued by the instructor (2)

Mosby

Microbiology

Nutrition

Please list the textbooks you used the least or were not very helpful to you.

Community Dentistry

Wilkins (5)

Pharmacology (5)

Pattison

Nutrition

Got enough information in class lectures; didn't use books.

Please give suggestions for changes you would recommend that you feel would improve the Dental Hygiene Program at Ferris.

Improve the pharmacology course; many issues were lectured on that we do not deal with in dentistry.

Pharmacology course was difficult to understand, although he seemed like a good teacher. Didn't answer questions very well.

Have the program run through the summer. I felt some information, especially dental anatomy, was slightly forgotten, and took extra time the following semester to get back in the swing of things.

It might help to introduce the students to commonly used instruments by the dentist.

Prepare students better in dental specialties.

More emphasis on community dentistry for the boards.

Dental communication with patients.

Toward the end of the program, students should be put in an office-type situation. No instructor evaluations until the end. Allow one hour or less to complete a patient. My doctor was very understanding, but when I began, I had no idea how long it would take me to complete an ordinary prophylaxis.

More involvement between students and advisors.

More periodontal practice, especially root planing. (2)

More chairside instruction with calculus removal; emphasis on lateral pressure.

Do not stress the "Ferris" way so much as every office is different. It would be more beneficial to learn how to be flexible, considerate, and able to adapt to your surroundings than be graded on the specifics of Ferris.

I think the program should be spread out over three years. Many of the courses (i.e., microbiology, pharmacology, etc.) should be taken prior to starting the dental hygiene material.

**FERRIS STATE UNIVERSITY
DENTAL HYGIENE PROGRAM
GRADUATE QUESTIONNAIRE RESULTS
1997**

1. Are you currently employed as a dental hygienist?

- 1. Yes (16)
- 2. No (0)

2. Which type of setting best describes your current primary place of employment? Please circle one.

- 1. Practicing in a private dental office (14)
- 2. Practicing in a private dental office and teaching in a dental hygiene program
- 3. Practicing in a private dental office and continuing education toward an advanced degree (1)
- 4. Continuing education toward an advanced degree
- 5. Practicing in public health Health Dept. (1)
- 6. Involved in research
- 7. Practicing in an institutional/industrial setting other than those specified above
- 8. Unemployed
- 9. Awaiting opportunity to take national/state boards
- 10. Other

3. How many hours per week are you employed as a dental hygienist?

- 1. 1-8 hours (1)
- 2. 9-16 hours
- 3. 17-24 hours
- 4. 25-32 hours (4)
- 5. 33-44+ hours (11)

4-8. What resources did you use to find your current job(s)?

- 4. Ferris Placement Office (1)
- 5. FSU Dental Hygiene Job Board
- 6. Newspaper/Journal Ads (9)
- 7. Dental Hygiene Organization
- 8. Other Phone book (7)

9. If you are not currently employed, please indicate why.

- 1. Have not passed the National Board Dental Hygiene Exam
- 2. Have not passed the NERB
- 3. Could not find employment
- 4. Other

The following list describes some of the responsibilities which may be delegated to a dental hygienist in Michigan. In Column I (Importance) at the left, circle the number corresponding to the importance of each item in relation to the practice of dental hygiene. If it is not applicable, please mark NA.

- NA = Not applicable to my practice
 1 = Not very important to my practice
 2 = Moderately important to my practice
 3 = Essential to my practice

In Column II (Preparation) located at the right, circle the appropriate level at which you feel the Dental Hygiene program prepared you to perform each responsibility. Please add additional comments to better express your opinion at the end of this survey.

- NA = Need not be included in the curriculum
 1 = Need additional preparation
 2 = Adequately prepared
 3 = Well prepared

Column I IMPORTANCE IN MY CURRENT RDH POSITION					RESPONSIBILITY	Column II PREPARATION BY FERRIS STATE UNIVERSITY				
NA	1	2	3	NA		1	2	3		
					<u>Interpersonal/Professional Skills</u>					
1.	0	0	5	11	Personal appearance	0	0	0	16	
2.	0	0	4	12	Interpersonal skills (communication)	0	0	6	10	
3.	0	0	0	16	Ability to be part of the dental office "team"	0	2	4	10	
4.	0	0	1	15	Professional presence/attitude	0	0	2	14	
5.	0	0	5	11	Ability to inform and educate patient	0	1	2	13	
6.	0	8	7	1	Scores from National and/or Regional Board exams	0	2	4	10	
7.	0	5	6	5	Computer Skills	0	9	5	1	
					<u>Diagnostic/Assessment Skills</u>					
8.	0	1	5	10	Periodontal assessment and treatment planning	0	1	5	10	
9.	0	0	8	8	Ability to make dental hygiene diagnosis	0	0	2	14	
10.	0	1	4	11	Interpret radiographs	0	0	2	14	
11.	0	3	6	7	Oral pathologies assessment	0	0	4	12	
12.	0	0	2	14	Obtain a complete medical/dental history	0	0	0	16	
					<u>Performance Skills</u>					
13.	0	0	0	16	Hand scaling	0	0	3	13	
14.	1	1	4	10	Root planing	0	4	6	6	
15.	1	0	1	14	Ability to use rotary polisher	1	0	1	14	
16.	1	1	2	12	Ultrasonic scaling	0	1	6	9	
17.	3	6	1	6	Sealant placement	0	0	3	13	
18.	3	2	4	7	Ability to perform oral irrigation	0	1	5	10	
19.	0	1	3	12	Probe	0	0	2	14	
20.	10	4	2	0	Pulp vitality tests	1	4	6	5	
21.	1	1	9	5	Tooth desensitizing agents/topical anesthetics application	0	0	6	10	
22.	1	0	1	14	Topical fluoride application	0	0	0	16	
23.	0	0	1	15	Take radiographs	0	0	1	15	
24.	8	5	2	1	Polish amalgams	3	1	2	10	
25.	9	4	3	0	Temporary restorations	5	3	4	4	
26.	5	6	3	2	Alginate impressions	4	5	1	6	
27.	6	6	2	1	Pouring study models	3	4	3	6	
28.	8	7	1	0	Trimming study models	4	4	3	5	
29.	9	4	1	2	Mixing cements	4	5	1	6	
30.	12	2	1	1	Mixing and placing periodontal packs	4	6	3	3	
					<u>Management/Systems Skills</u>					
31.	1	2	6	7	Equipment and supplies maintenance	0	0	8	8	
32.	2	1	3	10	Autoclave/asepsis equipment use	0	1	5	10	
33.	1	0	0	15	Aseptic technique	0	0	1	15	

SECTION TWELVE: EMPLOYER SURVEY RESULTS

Graduates work in a variety of general practice and specialty dental offices throughout Michigan and other states. Therefore, tracking graduate employers is somewhat impossible. When the graduate survey was mailed, it also included an information letter and employer survey that asked the graduate to give the survey to their employer to complete and return in the postage paid envelope. Of the 106 surveys mailed, only ten employers returned the survey.

The survey addressed issues related to interpersonal/professional skills, diagnostic/assessment skills, performance skills, and management/system skills. The survey asked the employer to identify the importance of each responsibility that a dental hygienist may perform in their office, and the second request was to respond to the appropriate level at which the employer feels the FSU graduate hygienist they employ performs each responsibility.

Results

All employers surveyed felt the Dental Hygiene graduates from Ferris State University were adequately prepared.

Comments regarding this area are as follows:

1. Our FSU graduate training was good.
2. Generally, our recent graduate is an excellent member of our staff. We are glad to have her.

See survey results on the next page.

FERRIS STATE UNIVERSITY DENTAL HYGIENE PROGRAM EMPLOYER SURVEY RESULTS

The following list describes some of the responsibilities which may be delegated to a dental hygienist in Michigan. In Column I (Importance) at the left, circle the number corresponding to the importance of each item in relation to the practice of dental hygiene in your office. If it is not applicable, please mark NA.

- NA = Not applicable to my practice
- 1 = Not very important to my practice
- 2 = Moderately important to my practice
- 3 = Essential to my practice

In Column II (Preparation) located at the right, circle the appropriate level at which you feel the FSU graduate hygienist you employ performs each responsibility. Please add additional comments to better express your opinion at the end of this survey.

- NA = Need not be included in the curriculum
- 1 = Need additional preparation
- 2 = Adequately prepared
- 3 = Well prepared

If more than one Ferris graduate has been employed in your practice, please reflect an average of their skill levels in Column II. *Please answer the following questions only as they relate to the Ferris State University graduates employed within the last five years.*

Column I IMPORTANCE TO MY CURRENT HYGIENIST POSITION				<u>RESPONSIBILITY</u>	Column II PREPARATION BY FERRIS STATE UNIVERSITY			
NA	1	2	3		NA	1	2	3
				<u>Interpersonal/Professional Skills</u>				
0	0	2	8	Personal appearance	0	0	4	5
0	0	0	10	Interpersonal skills (communication)	1	0	0	3
0	0	1	9	Ability to be part of the dental office "team"	0	1	3	6
0	0	0	10	Professional presence/attitude	0	0	4	6
0	0	0	10	Ability to inform and educate patient	0	0	6	4
4	2	4	0	Scores from National and/or Regional Board exams	4	0	6	0
2	3	4	1	Computer Skills	3	3	2	2
				<u>Diagnostic/Assessment Skills</u>				
0	0	1	9	Periodontal assessment and treatment planning	0	2	5	3
0	0	2	8	Ability to make dental hygiene diagnosis	0	2	5	3
0	0	2	8	Interpret radiographs	0	1	4	5
0	0	3	7	Oral pathologies assessment	0	2	6	2
0	0	3	7	Obtain a complete medical/dental history	0	0	5	5

Column I IMPORTANCE TO MY CURRENT HYGIENIST POSITION				RESPONSIBILITY	Column II PREPARATION BY FERRIS STATE UNIVERSITY			
NA	1	2	3		NA	1	2	3
				Performance Skills				
0	0	1	9	Hand scaling	0	1	5	4
0	0	1	9	Root planing	0	4	3	3
0	1	1	8	Ability to use rotary polisher	0	1	3	6
1	0	2	7	Ultrasonic scaling	1	2	5	3
3	0	1	6	Sealant placement	2	1	4	3
3	0	2	5	Ability to perform oral irrigation	2	0	5	3
0	1	2	7	Probe	1	0	5	4
0	1	1	2	Pulp vitality tests	8	1	1	0
2	1	4	3	Tooth desensitizing agents/topical anesthetics application	1	0	8	1
0	0	2	8	Topical fluoride application	0	0	5	5
0	0	0	10	Take radiographs	1	2	1	6
5	1	1	3	Polish amalgams	5	1	2	2
5	1	3	1	Temporary restorations	5	2	2	1
3	1	3	3	Alginate impressions	5	4	1	0
4	3	1	2	Pouring study models	6	1	3	0
5	2	1	2	Trimming study models	7	2	1	0
5	2	2	1	Mixing cements	6	2	2	0
6	1	2	1	Mixing and placing periodontal packs	5	2	3	0
				Management/Systems Skills				
1	0	6	4	Equipment and supplies maintenance	1	1	5	3
1	0	1	8	Autoclave/asepsis equipment use	1	1	5	3
0	0	1	9	Aseptic technique	0	1	3	6

Have you ever hired a dental hygienist who had graduated from the Ferris State University Dental Hygiene Program? 10 Yes No

If so, were you satisfied with this employee? 10 Yes No

When you are making a dental hygienist hiring decision, would you choose a Ferris graduate over a graduate from another program? 3 Yes 2 No 5 Doesn't matter

Your year of graduation from Dental School _____

Type of practice (general practice or specialty)? General and Periodontal

Additional Comments:


I believe instrument sharpening skills are very important, but seems to receive less emphasis these days.

Our FSU graduate training was good.

Generally, our recent graduate is an excellent member of our staff. We are glad to have her with us.

Communication could be better, but I realize the personality of the hygienist is a big factor.

Acticite therapy and placement should be introduced. Patients with orthodontics should be a requirement.

 Poor training in radiography and also very poor training in infection control and bloodborne pathogen standards.

SECTION THIRTEEN: ADVISORY COMMITTEE SURVEY RESULTS

The dental hygiene programs advisory committee meets twice during each academic year. The committee developed one of the survey components that was used for both the graduate and employer survey for this Academic Program Review document. The committee consists of dentists, hygienists and recently a dental hygiene student.

The survey was given to advisory committee members and completed during our spring 1997 meeting. As a result of this survey, it was decided prior to our next meeting scheduled for October 1997, a tour of the dental hygiene clinic would occur during a patient treatment laboratory.

Strengths noted in the Dental Hygiene Program are:

1. Instructional program content and quality
2. Instructional equipment is current and representative of that used on the job
3. Instructional facilities allocate sufficient space to support quality instruction
4. Instructional facilities meet essential health and safety standards.
5. Job opportunities exist for students completing the program

Areas that need improvement in the Dental Hygiene Program are:

1. Demonstrate that students are prepared for entry level employment
2. Collect information on job success and failure of former students
3. Instructional facilities need adequate ventilation

**ADVISORY COMMITTEE PERCEPTIONS OF THE
DENTAL HYGIENE PROGRAM
COLLEGE OF ALLIED HEALTH SCIENCES
1997**

Please answer the following:

1. What are the major strengths of the college's dental hygiene program?

Technology - Intraoral Camera - computers - dedicated instructors

You can tell the program is striving to stay on top!!

Utilization of advisory board input staff

Apparent cohesiveness of faculty, seem to work well together

2. What are the major needs for improvement in the college's dental hygiene program?

It sounds like a need for new chairs.

3. Do you have additional comments or suggestions for the program or for utilization of the advisory committee? If so, please state briefly.

**ADVISORY COMMITTEE PERCEPTIONS OF THE
DENTAL HYGIENE PROGRAM
COLLEGE OF ALLIED HEALTH SCIENCES
SURVEY RESULTS
1997**

INSTRUCTIONS: Rate each item using the following guide: <i>EXCELLENT</i> means nearly ideal, top 5 to 10% <i>GOOD</i> is a strong rating, top one-third <i>ACCEPTABLE</i> is average, the middle-third <i>BELOW EXPECTATIONS</i> is only fair, bottom one-third <i>POOR</i> is seriously inadequate, bottom 5 to 10% <i>A comment column has been provided if you wish to explain your rating.</i>		Poor	Below Expectations	Acceptable	Good	Excellent	Don't Know	
	1	2	3	4	5			COMMENTS
Please rate each item below:								
1. Instructional program content and quality are: • Based on performance objectives that represent job skills and knowledges required for successful entry level employment.				4	2	1		
• Designed to provide students with practical job application experience.			1	3	2	1		
• Responsive to upgrading and retraining needs of employed persons.				3	2	2		
• Periodically reviewed and revised to keep current with changing job practices and technology.				3	3	1		
2. Instructional equipment is: • Well maintained.			1	2	2	2		
• Current and representative of that used on the job.			2	1	1	3		
3. Instructional facilities: • Provide adequate lighting, ventilation, heating, power, and other utilities.			1	2	1	3		Need adequate ventilation.
• Allocate sufficient space to support quality instruction.				3	1	3		
• Meet essential health and safety standards.				2	2	3		
4. Placement: • Services are available to students completing the program.				3	2	2		
• Job opportunities exist for students completing the program or leaving with marketable skills.				2	5			
5. Follow-up studies on program completers and leavers (students with marketable skills): • Demonstrate that students are prepared for entry level employment.			3	1	2	1		
• Collect information on job success and failure of former students.			2	1	2	2		
• Provide information used to review and, where warranted, revise the program.			1	1	3	2		

SECTION FOURTEEN: CONCLUSIONS

Ferris State University has one of the largest programs in the country. Managing 120 dental hygiene students with a 30 chair dental clinic poses unique management challenges to the faculty and staff. Implementing creative approaches to classroom, lab, and clinical instruction continues to be a strength for the program. Initiatives to include collaboration, team building, and critical thinking a classroom of 60 students have been a challenge. However, the faculty continue to develop new methodologies using technology, problem based learning modules, case presentations, group discussion, and writing to learn projects. These innovations have assisted in grooming dental hygienists who assume leadership positions within the dental industry and who are praised by their employers.

Ferris State University Dental Hygiene Program continues to be a leader in providing quality education to its students. Many students pursue leadership roles. The current President of the Michigan Dental Hygiene Association is a Ferris graduate, as are many of the executive officers and local society Presidents. Several MDHA past Presidents have been Ferris graduates. A Ferris graduate currently serves the State Board of Dentistry that manages licensing of dentists, dental assistants, and dental hygienists.

Several Ferris graduates, nationally recognized experts on dental hygiene issues, actively publish and lecture at various dental meetings internationally. Many of these graduates have been invited to return to Ferris to deliver continuing education programs, serve as guest lecturers, and actively recruit new students.

The program continues to develop and use innovative instructional technologies and methods in the classroom. The incorporation of Intra-Oral Photography allows close up video photography inside the mouth, which enables faculty to demonstrate clinical techniques with increased visual projection. The videotapes are stored and have been used to tutor students, and orient new clinical teaching staff to procedures. The improvement in instruction using this technology was noted by staff and students who formerly had to lean over an instructor to "see" demonstrations. This project has been reported at two national dental meetings allowing for national recognition of Ferris State University.

The use of electronic management incorporating bar coding/scanning has enabled clinical teaching staff to spend less time manually documenting student progress, freeing time to instruct students. This innovative project including adaptation of dental office software to a student clinical environment was accepted for presentation at three national dental meetings, including the World Congress combined meeting of the ADA and the International Federation of Dentists. An article published by the American Dental Hygiene Association, state, and national presentations have resulted in a number of phone inquiries from other programs wanting to implement the same technology. Prairie State College, Illinois, sent their entire dental hygiene faculty to visit Ferris' clinic and spend a day with faculty and staff to learn more about implementing a similar program in their school.

Leadership has been modeled to students. Faculty and staff are involved in their profession and present seminars, table clinics, poster sessions, authorizing articles for professional publication, and serving the community. Several students and faculty have received recognition for their table clinic presentations at the state dental meeting. Ferris consistently wins the "People's Choice" Award for student presentations.

Ferris' leadership in quality education has been recognized by the awarding of First Place awards at the American Association of Dental Schools Annual Sessions. A 1997 graduate recently received an honorable mention for her community project involving the provision of dental care to indigent children through the Ferris clinic.

Ferris' Dental Hygiene Program has emerged as a leader in providing quality continuing education programs. Beginning initially as a project designed to offer lifelong learning to the many FSU graduates, it has blossomed into a service which attracts dentists, assistants, office managers, and hygienists from across the state who did not attend Ferris as students. The program has generated thousands of dollars for the program, which have resulted in faculty development monies, upgraded computers for faculty and staff, and provided supplemental funding for adjunct clinical faculty. In addition, the service also offers our own staff opportunities for free continuing education programs with nationally recognized speakers. This has been a cost effective means to keep staff updated with current trends and techniques, and has served to update alumni of current Ferris activities with table displays. Ferris alumni enjoy visiting their campus and reacquainting themselves with their former instructors.

A recent continuing education seminar on *Technology in the Dental Office* received rave reviews from the audience as an innovative course unlike any other attended. Numerous technical displays, combined with computer aided instructional technology, followed by lab sessions with "hands on" lab activities provided the audience with practical advice for updating their dental offices. Due to popular request, the seminar will be repeated.

Several continuing education courses have filled to capacity (100 attendees) with more on waiting lists. A newly developed *Radiography Certification* seminar is providing on the job trained dental assistants with the necessary education to take radiographs. This course has been well received by the participants and assists local dentists in meeting the Michigan Board of Dentistry required training for personnel taking radiographs. It has also been useful in providing a refresher for assistants and hygienists who have been out of the workforce.

Faculty and staff continue to polish their knowledge and skills through various activities such as returning to clinical practice, research activities, sabbatical leaves, community projects, and acquiring additional degrees. Recently a faculty member was awarded her degree in nursing completed during a sabbatical leave. The additional knowledge and skill will be applied in various community projects aimed at educating students about the various emerging new non-traditional roles for dental hygienists. Currently, a faculty member is pursuing a research project titled, *An Investigation of the Incorporation of Technology into Dental Hygiene Diagnostic and Therapeutic Regimens*, and updating her knowledge in instructional technology. The CAHS and the Allied Dental Department have committed \$2,500 to support this applied research. Information gathered from the research will be published to add to the body of scientific knowledge of dental hygiene, design future continuing education courses, and make recommendations for curriculum changes.

Dental Health Projects implemented by staff and students together offers the community many varied services such as, the annual Children's Dental Health Fair, presentations to local school classrooms on oral health and hazards of tobacco, nursing home staff training on oral health, nursing home resident care, senior citizens group presentations, and developmentally disabled children and adult education and care. The campus dental hygiene clinic has provided services to many indigent community residents who probably would not have received any other dental care.

The fiscal restructuring has created stress among the faculty and staff as everyone adjusts to CHANGE. Many faculty have gone from team teaching core courses to teaching alone in an effort to improve productivity. Reduction of the full time director position combined with reduction of a faculty position have created greater responsibilities in advising students, administrative tasks, recruiting, and teaching. Sabbatical leaves (with no replacement faculty) during 1996-97 and 1997-98 left the remaining faculty with greater course responsibilities. Dental hygiene faculty have assumed responsibility for additional course preparations, administration, and management. To keep the workloads consistent with workload policy limits, clinical and laboratory contact for faculty has been reduced. Utilization of Clinical Dental Hygienist positions to replace faculty in managing clinical and laboratory instruction has created additional CHANGE that continues to be studied for it's impact on the program. Breakdowns in communication between faculty and staff who are managing the additional responsibilities need to be continually addressed.

Studies regarding the effectiveness of the restructuring plan have yet to be implemented. Stress reported by faculty, staff, and students as they cope with change and additional responsibilities needs to be addressed to insure the high quality of education and leadership role of Ferris' program be maintained. Continuing dialogue on total quality improvement of the program needs to be ongoing with the entire staff with generous doses of student and alumni feedback. Keeping enthusiasm high for all the good things happening at Ferris is vital to the recruitment of new students and the creation of satisfied "customers". Lifelong learning opportunities allow alumni to serve as ambassadors for Ferris and should continue to be promoted as a means to gain additional program funds, provide continuing service to graduates, and update skills of faculty and staff.

Coping with the numerous changes the past few years has left many feeling exhausted. Changes in leadership to adapt to the new administrative structure will have to be mastered. A leadership focused on shared responsibility, mutual trust, and respect for each team member's uniqueness must be insured for this program to continue delivering high quality education with enthusiasm. Professional enrichment opportunities geared toward communication, team building, valuing differences, and leadership should be encouraged to assist and support the dedicated faculty and staff as they learn to "think outside the box" to cope with continued changes.

- **Graduate and Employer Surveys**

The surveys received by graduates from 1995 and 1996 identify a quality graduate. Few weaknesses were identified. Many areas of weakness have been corrected from previous input received from student surveys prior to graduation.

- **Student Perceptions of the Program**

Students perceptions identified concern with financial aid, student advising, and cost for books and supplies (instruments, clinical attire). The program evaluates the student instrument purchase requirements annually. Changes in the instrument requirements that have reduced student costs have included changing the instrument supplier, establishing a buy back with the Bookstore for some equipment, and reducing the number of items that the students are asked to purchase. These changes have reduced the instrument costs by several hundred dollars.

- **Enrollment Trends:**

Enrollment in the dental hygiene program continues to be strong. Not all dental hygiene students are calculated into the Program Productivity data costs as they are dual degree students. This is a concern as these students are pursuing another degree at the same time they are enrolled in DHYG courses, and utilize our resources.

- **Faculty Perceptions of the Program**



The administration needs to find ways to better work together. Equipment replacement in the dental hygiene clinic emerged as a major area the program needs to address.

Supportive services for disadvantaged and handicapped students needs to be developed. The program's size presents management and teaching challenges that smaller programs may not face.

Continuing Education presentations have served the professional community and generated revenue to support faculty development.

The program has a strong commitment to community service. The clinic provides dental hygiene care to both the University and community. Many patients would be unable to receive any dental hygiene care without this clinic, as the fees are very low. Grants and donations have provided care for several special groups, including MOARC clients, and select Eastwood Elementary school children. The clinic offers a free prophylaxis day to children in celebration of Children's Dental Health Month. The clinic is the site of "Toothbrush Exchange Day", another children's dental health month activity. This activity is a cooperative effort between the Allied Dental programs and Phi Delta Alpha (a student dental organization), and the local dental community.

Through the efforts of a Community Dentistry I and II service projects, numerous community groups and agencies hear presentations by our students. Presentations are made to varied audiences including: Head Start, pre-school groups, the area's public and private schools, nursing homes, Eagle Village, and senior meal sites. The student groups are much in demand. Often there are more requests for speakers than there are students available to speak.

- **Advisory Committee Perceptions of the Program**

Overall, the Advisory Committee feels the program is strong.

During discussion at the last advisory committee meeting, discussion about the Advisory Committee survey began. As a result of the discussion, our next Advisory Committee meeting will be held in the College of Allied Health Sciences. The committee members have not been in the dental hygiene facilities for several years. The meeting will begin with a tour while clinic is in session, and then the meeting will be held.

- **Labor Market Analysis**

In the future, the program will conduct a labor market analysis on an annual basis and use the data to develop and evaluate the program.

- **Evaluation of Program Resources**

Intraoral camera, video camera, and clinic VCR with monitors have allowed instructional videotapes to be created and used in clinic. Clinic computer has increased the efficiency in tracking patients, student requirements, and scheduling patients. Vocational Education funds have been used to provide equipment needs, and have enabled the program to include current technologies.

- **Curriculum**

Curriculum review should be done on an annual basis. The curriculum is scheduled for review and revisions this academic year. Increase communication with FSU support course instructors.

SECTION FIFTEEN: RECOMMENDATIONS

1. Develop an amortization of dental clinic equipment.
2. An immediate plan needs to be developed for replacement of dental units and chairs.
3. Clarification of the administrative structure in the Allied Dental Department since the implementation of fiscal restructuring.
4. Review the dental hygiene curriculum on an annual basis.
5. Submit recommended curriculum revisions during this academic year.
6. Increase the use of media technologies.

APPENDICES A - E

Appendix A PROGRAM REVIEW PANEL EVALUATION RESULTS

Program: Dental Hygiene

Instructions: Circle the number which most closely describes the program you are evaluating.

- | | | |
|-----------|---|---|
| 1. | Student Perception of Instruction | Average Score <u>4</u> |
| | 5 4 3 2 1 | |
| | Currently enrolled students rate instructional effectiveness as extremely high. | Currently enrolled students rate the instructional effectiveness as below average. |
| 2. | Student Satisfaction with Program | Average Score <u>4</u> |
| | 5 4 3 2 1 | |
| | Currently enrolled students are very satisfied with the program faculty, equipment, facilities, and curriculum. | Currently enrolled students are not satisfied with program faculty, equipment, facilities, or curriculum. |
| 3. | Advisory Committee Perceptions of Program | Average Score <u>4.25</u> |
| | 5 4 3 2 1 | |
| | Advisory committee members perceive the program curriculum, facilities, and equipment to be of the highest quality. | Advisory committee members perceive the program curriculum, facilities, and equipment needs improvement. |
| 4. | Demand for Graduates | Average Score <u>5</u> |
| | 5 4 3 2 1 | |
| | Graduates easily find employment in field. | Graduates are sometimes Forced to find positions out of their field. |
| 5. | Use of Information on Labor Market | Average Score <u>4</u> |
| | 5 4 3 2 1 | |
| | The faculty and administrators use current data on labor market needs and emerging trends in job openings to systematically develop and evaluate the program. | The faculty and administrators do not use labor market data in planning or evaluating the program. |

6. Use of Profession/Industry Standards

Average Score 4.5

5 4 3 2 1

Profession/industry standards (such as licensing, certification, accreditation) are consistently used in planning and evaluating this program and content of its courses.

Little or no recognition is given to specific profession/industry standards in planning and evaluating this program.

7. Use of Student Follow-Up Information

Average Score 4

5 4 3 2 1

Current follow-up data on completers and leavers are consistently and systemically used in evaluating this program.

Student follow-up information has not been collected for use in evaluating this program.

8. Relevance of Supportive Courses

Average Score 3

5 4 3 2 1

Applicable supportive courses are closely coordinated with this program and are kept relevant to program goals and current to the needs of students.

Supportive course content reflects no planned approach to meeting needs of students in this program.

9. Qualifications of Administrators and Supervisors

Average Score 3.75

5 4 3 2 1

All persons responsible for directing and coordinating this program demonstrate a high level of administrative ability.

Persons responsible for directing and coordinating this program have little administrative training and experience.

10. Instructional Staffing

Average Score 3.75

5 4 3 2 1

Instructional staffing for this program is sufficient to permit optimum program effectiveness.

Staffing is inadequate to meet the needs of this program effectively.

11. Facilities

Average Score 4.25

5 4 3 2 1

Present facilities are sufficient to support a high quality program.

Present facilities are a major problem for program quality.

12. Scheduling of Instructional Facilities

Average Score 4.25

5 4 3 2 1

Scheduling of facilities and equipment for this program is planned to maximize use and be consistent with quality instruction.

Facilities and equipment for this are significantly under-over scheduled.

13. Equipment

Average Score 3.25

5 4 3 2 1

Present equipment is sufficient to support a high quality program.

Present equipment is not adequate and represents a threat to program quality.

14. Adaption of Instruction

Average Score 4.25

5 4 3 2 1

Instruction in all courses required for this program recognizes and responds to individual student interests, learning styles, skills, and abilities through a variety of instructional methods (such as small group or individualized instruction, laboratory or hands-on experiences, credit by examination).

Instructional approaches in this program do not consider individual student differences.

15. Adequate and Availability of Instructional Materials and Supplies

Average Score 4.25

5 4 3 2 1

Faculty rate that the instructional materials and supplies as being readily available and in sufficient quantity to support quality instruction.

Faculty rate that the instructional materials are limited in amount, generally outdated, and lack relevance to program and student needs.

ADMINISTRATIVE PROGRAM REVIEW

Program/Department: Dental Hygiene/Allied Dental

Date Submitted: October 18, 1996 Dean: Isabel J. Barnes

Please provide the following information:

Enrollment/Personnel

	Fall 1992	Fall 1993	Fall 1994	Fall 1995	Fall 1996
Tenure Track FTE	6	6	5	5	5
Overload/Supplemental FTEF	1.9	0.12	1.18	0.89	
Adjunct/Clinical FTEF (unpaid)	0	0	0	0	0
Enrollment on-campus total*	123	107	101	102	107
Freshman		3	16	14	5
Sophomore		36	21	32	30
Junior		43	33	44	43
Senior		25	21	22	24
Pre-Dental Hygiene		58	65	70	103
TBD	0	0	0	0	5
Enrollment off-campus*	0	0	0	0	0

*Use official count (7-day count for semesters, 5-day count for quarters).

Financial

Expenditures*	FY92	FY93	FY94	FY95	FY96
Supply & Expense	\$39,499	\$26,441	\$26,170	\$17,129	\$16,325
Equipment**	0	0	0	0	0
Gifts & Grants	2,318	1,237	7,414	10,576	\$ 1,358

*Use end of fiscal year expenditures.

**Does not include Voc-Ed and General Fund dollars.

Other

	AY 91-92**	AY 92-93**	AY93-94	AY 94-95	AY 95-96
Number of Graduates * - Total	49	59	56	46	51
- On campus	49	59	56	46	51
- Off campus	0	0	0	0	0
Placement of Graduates	93%	71%	100%	80%	N/A
Average Salary	\$28,963	\$31,740	\$33,367	\$29,413	N/A
Productivity - Academic Year Average	425	427	343	343	389
- Summer	0	0	0	0	0
Summer Enrollment	8	20	17	47	5

* Use total for academic year (F, W, S)

**Represents productivity on quarter system.

I. Strengths

- A. Faculty - Are excellent classroom instructors and are dedicated to the students. Productivity is beginning to improve.
- B. Students - Excellent performance on the 1996 National Board examinations.
- C. Curriculum - not applicable.
- D. Facilities - The clinic facilities provide state-of-the art facilities. The recent addition of display monitors that can be used for a variety of purposes will enhance this facility for teaching purposes, especially for the first year students.
- E. Budget - Clinic income continues to offset teaching costs.
- F. Other - Bar-coded computerized record system permits periodic reports to students of their progress toward meeting course requirements. Strong advisory committee.

II. Concerns

- A. Faculty - not applicable.
- B. Students - There is a large list of pre-students striving to meet rigorous admission criteria but there is a high attrition rate during the first year of the program. It is hoped that the SLA that companies DHYG 112 will help to reduce the attrition.
- C. Curriculum - Current configuration creates student stress. Requirement of CHEM 114 and BIOL 205 prior to entry into the professional courses creates an eligibility list management problem.
- D. Facilities - Long range plans to modernize the clinic need to be developed
- E. Budget - not applicable.

III. Future goals (including time frame)

- A. Faculty - Faculty members should complete a current clinical experience by Fall 98.
- B. Students - 90% of graduates will satisfactorily complete board examinations by FY98.
- C. Curriculum - Current curriculum review should be approved for implementation no later than Fall 1998, preferably by Fall 1997. Outcomes assessment plan should be in place by May 1997 with implementation to start in Fall 1997.
- D. Facilities - Develop long term plan for modernizing clinic by start of FY99.
- E. Budget - not applicable.
- F. Other - Consider converting sterilizing room supervisor to 10 month appointment in FY98

IV. Recommendations

- A. Faculty - Innovative ways to retain clinical skills should be explored.
- B. Students - Student retention and recruiting of underrepresented individuals should be stressed.
- C. Curriculum - Current curriculum review should be completed.
- D. Facilities - not applicable.
- E. Budget - not applicable.

V. Progress toward 1995-96 Goals

Was able to get appropriate title and increased salary for former clinical laboratory technicians. Performance on National Boards was excellent but there was a problem with the performance on the North East Regional Boards that was shared with a number of institutions. Addition of SLA to DHYG 112 should enhance retention in the professional program. Workload policy was not revised.

APPENDIX C

Allied Dental Department

Fiscal Year 1998

GOAL 1.

Provide a variety of learning opportunities and activities in the classroom, clinic and laboratory to address a diverse student population with different learning styles and abilities.

BG 1, 2

AASE 1, 2, 3, 4

MAJOR ACTIVITIES AND PROCESSES

- Evaluate courses for SLA opportunities.
- Accommodations will be made for disabled students.
- Develop a survey to determine special needs of students.
- Develop a set of competencies to be mastered by each student.
- Develop a variety of learning activities for each competency.
- Identify the availability of cultural enrichment activities for students, faculty and staff.

EXPECTED OUTCOMES

- Two (2) SLA courses will be offered in Academic Year 1997-98.
- Increase Department retention rate from 84% (1995-96) to 90% (1997-98).
- Increase minority enrollment 50%, comparing Academic Year 1995 by Academic Year 1998.
- Each dental program will offer content in cultural diversity in at least one course.
- Faculty, staff and students will participate in at least one cultural/ethnic/disability activity that enhances the understanding of our diverse culture.

INDICATORS/SOURCES

- Enrollment and retention data
- Course syllabi
- Faculty, staff and student documentation
- Special needs survey

REPORTING PROCESS

- Program and Department Meeting minutes.
- Special needs survey results.
- Graduation survey results.
- Annual Department Report to Allied Dental faculty, staff and Dean.

RESOURCE REQUIREMENTS

- Copy and mailing costs for surveys - \$250.
- Financial support of \$500 for workshops or activities that enhance faculty and staff's ability to understand and manage a culturally diverse classroom.
- \$6,000 to support two SLA courses.

	FTE	Salary	Adult Part-Time	Student Wage	S&E	Equipment	Total
Internal reallocation					\$750		\$750
One-time resource request							
Base funding request		\$6,000					\$6,000
Total		\$6,000			\$750		\$6,750

GOAL 2.

Assess the educational experiences of students that prepare them for entry level into their profession.

BG 1

AASE 1

MAJOR ACTIVITIES AND PROCESSES

- Graduates and employers will be surveyed annually.
- The programs will be evaluated annually for effectiveness.
- Monitor students' performance on the National Board Dental Hygiene Examination (NBDHE) and Northeast Regional Board (NERB) for dental hygiene and Recognized Graduate (RG) examination for dental technology.
- Begin review of educational related portions of accreditation standards in preparation for accreditation site visit in Academic Year 1997-98.

EXPECTED OUTCOMES

- Ninety percent (90%) of students will pass certification/licensure examinations by fiscal year 1998.
- Ninety percent (90%) of employers will report satisfaction with preparedness of graduates.
- Ninety percent (90%) of graduates will report satisfaction with their preparedness.
- Ninety percent (90%) of graduates will be working in their profession and/or enrolled in higher education opportunities.

INDICATORS/SOURCES

- Results of NBDHE, NERB and RG examinations will show a decrease of student failure rate from Academic Year 1995-96 of 10%.
- Results of graduate and employer surveys.
- FSU Career Planning and Placement Survey.
- Evaluations of courses, clinics and laboratories by students, faculty and staff.
- American Dental Association (ADA) Accreditation Report.

REPORTING PROCESS

- Results of surveys will be discussed at program meetings.
- Evaluations of courses, clinics and laboratories will be reported at faculty meetings.
- ADA Accreditation reports will be utilized to evaluate programs.
- Annual Department Report to Allied Dental faculty, staff and Dean.

RESOURCE REQUIREMENTS

- Copying and mailing costs of \$500 for surveys.

	FTE	Salary	Adult Part-Time	Student Wage	S&E	Equipment	Total
Internal reallocation					\$500		\$500
One-time resource request							
Base funding request							
Total							\$500

GOAL 3.

Enhance the professional skills of the departmental faculty and staff.

BG 4

AASE 2, 6

MAJOR ACTIVITIES AND PROCESSES

- All faculty and clinical staff members will participate in current clinical/laboratory experiences.
- One hundred percent (100%) of faculty and staff will actively participate in professional activities.

EXPECTED OUTCOMES

- Faculty and staff will keep current in their area(s) of expertise.
- Faculty and staff will hold individual membership in appropriate professional organizations.
- Faculty and staff will attend at least one professional meeting annually.
- Faculty and staff will serve on at least one Department, College, or University committee.

INDICATORS/SOURCES

- Successful completion of students attempting NBDHE, NERB and RG examinations.
- Re-certification and licensure of faculty and staff.

REPORTING PROCESS

- Faculty and staff reports of memberships and meetings attended.
- Travel requests.
- Faculty and staff reports of annual professional experience.
- Department, College and University Committee minutes.
- Annual Department Report to Dean.

RESOURCE REQUIREMENTS

- \$5,000 to support Allied Dental faculty and staff attendance at professional meetings.

	FTE	Salary	Adult Part-Time	Student Wage	S&E	Equipment	Total
Internal reallocation					\$5,000		\$5,000
One-time resource request							
Base funding request							
Total							\$5,000

GOAL 4.

Provide programs that meet the needs of the allied dental profession.

BG 2, 3, 4

AASE 1, 3

MAJOR ACTIVITIES AND PROCESSES

- Maintain a close working relationship with the Allied Dental Advisory Committee.
- The Allied Dental Advisory Committee will provide input on new technologies and clinical or laboratory skills that new graduates must possess upon graduation.
- Provide course, clinic and laboratory experiences that are relevant to practice.
- Provide state-of-the-art facilities and equipment to enhance education.
- Review ADA Accreditation Standards for dental technology and dental hygiene.
- Two certificate programs in dental technology will be developed by the end of Academic Year 1997.
- Provide continuing education to graduates.
- The Allied Dental recruiting plan will be implemented.
- Develop alternative dental technology internship opportunities.
- Survey dental professionals to determine need of dental radiology certification course and dental assistant certificate program.

EXPECTED OUTCOMES

- The Allied Dental Advisory Committee will make recommendations for technology and skills.
- Maintain accreditation of programs with the Commission on Dental Education, American Dental Association.
- The Dental Technology and Dental Hygiene programs will meet enrollment quota in Academic Year 1997-98.
- Certificate programs in dental technology will be offered Academic Year 1997-98.
- Ten percent (10%) of enrolled students in dental technology will be participating in new certificate programs in Academic Year 1997-98.
- The dental technology internship will be made flexible to accommodate students who have special needs.
- Dental professionals will support need for dental radiology and/or assisting certificates.
- Equipment will be updated or replaced to meet the needs of the educational program.
- Course and program improvements will be implemented as needed.

INDICATORS/SOURCES

- Course syllabi to reflect new technology and skills.
- Admissions Office Recruitment Listings.
- Advisory Committee minutes.
- Program and Department meeting minutes.
- Results of needs assessments.

REPORTING PROCESS

- Annual Department Report discussed with faculty, staff, Dean and Allied Dental Advisory Committee.

RESOURCE REQUIREMENTS

- \$400 printing and mailing costs for survey.
- S&E to support program(s).
- Financial and staff support for new program(s).
- Accreditation costs \$460 per year for both dental hygiene and dental technology, with an estimated cost of \$3,000 every seven years with the next accreditation year of 1998.
- Financial support of \$10,000 per year to repair, replace, or purchase new equipment.

	FTE	Salary	Adult Part-Time	Student Wage	S&E	Equipment	Total
Internal reallocation					\$3,860		\$ 3,860
One-time resource request							
Base funding request						\$10,000	\$10,000
Total							\$13,860

GOAL 5.

To provide a facility which allows dental hygiene students to obtain the clinical experience to prepare them for entry level dental hygiene practice.

BG 5

AASE 5, 6

MAJOR ACTIVITIES AND PROCESSES

- Provide a clinic that is a safe working environment for faculty, staff and students.
- Provide a clinic environment which is safe and comfortable for patients.
- Assure an adequate supply of clients, including new sources of clients.
- Assure dental instrument asepsis, instrument and laundry distribution.
- Provide accurate client records and student grading.
- Operate a fiscally responsible dental hygiene clinic.
- Review the job description and current responsibilities of the sterilizing room supervisor.
- Begin review of clinic related portions of accreditation standards in preparation for accreditation site visit in Academic Year 1997-98.
- Maintain sufficient equipment used in current dental hygiene practice for student use during their clinic experience.
- Analyze major equipment needs of clinic and prepare plan for obtaining the equipment.
- Review current dental related technologies (e.g., equipment) to determine which of these technologies are appropriate for implementation in the dental hygiene clinic.

EXPECTED OUTCOMES

- 90% of students will report satisfaction with their clinical laboratory environment.
- 90% of clients will report satisfaction with the care they received in the clinic.
- Client pool will remain constant to provide learning experiences for students.
- The clinic will continue to be fiscally responsible.
- The clinic will be utilized for national board exams, continuing education and dental practice.
- Sterilizing room supervisor will have 10 month employment contract in FY 1998.
- Continue the implementation of the dental clinic computerization using additional features of the dental management software.

INDICATORS/SOURCES

- Survey of client satisfaction.
- Survey of student satisfaction with clinic experience.
- Regular review of equipment needs with clinic staff.
- Using information generated by the dental management software, review patient pool, student achievement of clinic requirements and clinic income.

REPORTING PROCESS

- Survey results discussed with department head and clinic instructors.
- Survey results and department response reported to Dean.
- Financial status of the clinic will be reported to department head and Dean.
- Report of equipment needs (both replacement and new equipment) will be prepared and presented to the department head and Dean.

RESOURCE REQUIREMENTS

- Continued Vocational Education funding for major equipment.
- \$2,271 for sterilizing room supervisor's additional month of employment.
- Consumable clinic supplies, telephone, postage, laundry and clinic computer support funded through clinic receipts.

	FTE	Salary	Adult Part-Time	Student Wage	S&E	Equipment	Total
Internal reallocation							
One-time resource request							
Base funding request		\$2,271					\$2,271
Total		\$2,271					\$2,271

APPENDIX D

FERRIS STATE UNIVERSITY DENTAL HYGIENE PROGRAM PROGRESSION POLICY

Students must successfully complete all dental hygiene courses and general education courses in the sequence indicated on the dental hygiene checksheet. All course prerequisites must be met in order to advance in the curriculum.

Students must receive a C (2.0) or better in all required courses listed on the dental hygiene checksheet, with the exception of those courses indicated in the next paragraph, in order to advance to the next semester.

If a grade is received that is less than a C (2.0) in English, Sociology, Psychology, Cultural Enrichment elective, Speech, or Nutrition, the student will be allowed to progress in the program. However, the course must be repeated and a grade of C (2.0) or better received in order to graduate from the program.

APPENDIX E

FIRST YEAR DENTAL HYGIENE QUESTIONNAIRE

In order for you to collect 5 bonus points to be applied to fall semester, your test number must be included. The results will not be reviewed until after the semester is over. Please be honest as improvements can not be addressed unless they are brought to our attention. This evaluation has been designed to assist the faculty in improving course design. Please answer all questions.

Please use the following scale:

1. Strongly agree (SA)
2. Agree (A)
3. Neither agree nor disagree (N-A-D)
4. Disagree (D)
5. Strongly disagree (SD)

	SA	A	N-A-D	D	SD
1. The level of skill development attained in DHYG 114 lab was satisfactory preparation for my winter semester clinical experience.	1	2	3	4	5
2. The requirements for DHYG 114 were clearly stated in the syllabus.	1	2	3	4	5
3. The requirements for DHYG 125 were clearly stated in the syllabus.	1	2	3	4	5
4. In most instances, instructors were available during clinic for individualized instruction.	1	2	3	4	5
5. On the whole, I feel that clinic faculty have fairly evaluated my clinical performance.	1	2	3	4	5
6. I feel the number of hours of clinical practice was appropriate to achieve competence.	1	2	3	4	5
7. Academic course work in DHYG 112 was well integrated with my clinical learning experiences.	1	2	3	4	5
8. Academic course work in DHYG 124 was well integrated with my clinical learning experiences.	1	2	3	4	5
9. Academic course work in DHYG 126 was well integrated with my clinical learning experiences.	1	2	3	4	5
10. Academic course work in DHYG 136 was well integrated with my clinical learning experiences.	1	2	3	4	5

		SA	A	N-A-D	D	SD
11.	Academic course work in DHYG 228 was well integrated with my clinical learning experiences.	1	2	3	4	5
12.	Academic course work in CAHS 231 was well integrated with my clinical learning experiences.	1	2	3	4	5

PLEASE EVALUATE THE FACULTY AND STAFF ON THEIR EFFECTIVENESS IN PROVIDING INSTRUCTION, ASSISTANCE AND FEEDBACK.

1 - Excellent 2 - Good 3 - Fair 4 - Poor 5 - Didn't work with him/her

13.	Sidney	1	2	3	4	5
14.	Jackson	1	2	3	4	5
15.	Collins	1	2	3	4	5
16.	Burns	1	2	3	4	5
17.	Hansen	1	2	3	4	5
18.	Myers	1	2	3	4	5
19.	Meeuwenberg	1	2	3	4	5
20.	Peters	1	2	3	4	5
21.	Garlick	1	2	3	4	5
22.	Stolberg	1	2	3	4	5
23.	Turcotte	1	2	3	4	5
24.	Wolfer	1	2	3	4	5
25.	Foster	1	2	3	4	5
26.	Schoettle	1	2	3	4	5
27.	Danette Boyd	1	2	3	4	5
28.	Kathy Hess	1	2	3	4	5

29. List recommendations that you would give first year students to make the transition easier from pre-dental hygiene to first year dental hygiene.
30. Describe the strongest aspects of the Dental Hygiene program:
31. Describe the weakest aspects of the Dental Hygiene program and suggest how they can be remediated:
32. If any components in this survey are rated 4 or 5 (disagree/strongly disagree), please explain why:

SECOND YEAR DENTAL HYGIENE QUESTIONNAIRE

This evaluation has been designed to assist the faculty in improving course design. Please answer all questions.

Please use the following scale:

1. Strongly agree (SA)
2. Agree (A)
3. Neither agree nor disagree (N-A-D)
4. Disagree (D)
5. Strongly disagree (SD)

	SA	A	N-A-D	D	SD
1. The level of skill development attained in DHYG 125 lab was satisfactory preparation for fall/winter semester clinical experience in second year.	1	2	3	4	5
2. The DHYG 215 course content provided an adequate preparation for my winter semester clinical experience.	1	2	3	4	5
3. The requirements for DHYG 215 were clearly stated in the syllabus.	1	2	3	4	5
4. The requirements for DHYG 225 were clearly stated in the syllabus.	1	2	3	4	5
5. In most instances, instructors were available during clinic for individualized instruction.	1	2	3	4	5
6. On the whole, I feel that clinic faculty have fairly evaluated my clinical performance.	1	2	3	4	5
7. I feel the number of hours of clinical practice was appropriate to achieve competence.	1	2	3	4	5
8. Academic course work was well integrated with clinical learning experiences.	1	2	3	4	5
9. Academic course work in DHYG 211 was well integrated with my clinical learning experiences.	1	2	3	4	5
10. Academic course work in DHYG 214 was well integrated with my clinical learning experiences.	1	2	3	4	5
11. Academic course work in DHYG 223 was well integrated with my clinical learning experiences.	1	2	3	4	5

	SA	A	N-A-D	D	SD
12. Academic course work in DHYG 226 was well integrated with my clinical learning experiences.	1	2	3	4	5
13. Academic course work in DHYG 230 was well integrated with my clinical learning experiences.	1	2	3	4	5

PLEASE EVALUATE THE FACULTY AND STAFF ON THEIR EFFECTIVENESS IN PROVIDING INSTRUCTION, ASSISTANCE AND FEEDBACK.

1 - Excellent 2 - Good 3 - Fair 4 - Poor 5 - Didn't work with him/her

14. Sidney	1	2	3	4	5
15. Jackson	1	2	3	4	5
16. Collins	1	2	3	4	5
17. Burns	1	2	3	4	5
18. Hansen	1	2	3	4	5
19. Myers	1	2	3	4	5
20. Meeuwenberg	1	2	3	4	5
21. Peters	1	2	3	4	5
22. Garlick	1	2	3	4	5
23. Stolberg	1	2	3	4	5
24. Turcotte	1	2	3	4	5
25. Wolfer	1	2	3	4	5
26. Foster	1	2	3	4	5
27. Schoettle	1	2	3	4	5
28. Danette Boyd	1	2	3	4	5
29. Kathy Hess	1	2	3	4	5

30. List recommendations that you would give first year students to make the transition easier from first year dental hygiene to second year dental hygiene.
31. Describe the strongest aspects of the Dental Hygiene program:
32. Describe the weakest aspects of the Dental Hygiene program and suggest how they can be remediated:
33. If any components in this survey are rated 4 or 5 (disagree/strongly disagree), please explain why:

FERRIS STATE UNIVERSITY

INSTRUCTIONS TO RESPONDENTS

On the following pages, you are asked to give your perceptions of dental hygiene, such as goals and objectives, processes, and resources. Rate each item by checking your best judgment on a five point scale ranging from poor to excellent. Only check one answer per item. A "Don't Know" column has been provided in the event you really don't have sufficient information to rate an item. Space has been provided for you to note comments that may help to clarify your ratings, or to indicate modifications of a standard to make it more relevant for your program.

Criteria for excellent and poor ratings are provided for each item. *Excellent* represents a nearly ideal or exemplary situation; *poor*, one of a serious inadequacy. As a guide, ratings may be made with the following in mind:

- EXCELLENT* means ideal, top 5 to 10%
- GOOD* is a strong rating, top 1/3rd
- ACCEPTABLE* is average, the middle 1/3rd
- BELOW EXPECTATIONS* is only fair, bottom 1/3rd
- POOR* is seriously inadequate, bottom 5 to 10%

This form may be completed as a *consensus* evaluation by the principal persons involved with a specific occupational program. Examples of such persons would be instructors, department or division chairpersons, program coordinators, and administrators such as occupational dean. If preferred, respondents may complete individual forms.

To help with tabulation of responses, please provide the information requested below before completing your rating.

FACULTY PERCEPTIONS OF THE DENTAL HYGIENE EDUCATION PROGRAMS

	Poor 1	Below Expectations 2	Acceptable 3	Good 4	Excellent 5	Don't Know	Comments
GOALS AND OBJECTIVES							
1. Program Goals <u>Excellent</u> - Written goals for this program state realistic outcomes (such as planned enrollments, completions, placements) and are used as one measure of program effectiveness. <u>Poor</u> - No written goals exist for this program.							
2. Course Objectives <u>Excellent</u> - Written measurable objectives have been developed for all occupational courses in this program, and are used to plan and organize instruction. <u>Poor</u> - No written objectives have been developed for courses in this program.							

	Poor 1	Below Expectations 2	Acceptable 3	Good 4	Excellent 5	Don't Know	Comments
<p>3. Competency Based Performance Objectives</p> <p><u>Excellent</u> - Competency based performance objectives are on file in writing, consistent with employment standards, and tell students what to expect and help faculty pace instruction.</p> <p><u>Poor</u> - Competency based performance objectives have not been developed for courses in this program.</p>							
<p>4. Use of Competency Based Performance Objectives</p> <p><u>Excellent</u> - Competency based performance objectives are distributed to students and used to assess student progress.</p> <p><u>Poor</u> - Competency based performance objectives are not used with students for progress evaluation nor are students aware that they exist.</p>							
<p>5. Use of Information on Labor Market Needs</p> <p><u>Excellent</u> - Current data on labor market needs and emerging trends in job openings are systematically used in developing and evaluating this program.</p> <p><u>Poor</u> - Labor market data is not used in planning or evaluation.</p>							
<p>6. Use of Profession/Industry Standards</p> <p><u>Excellent</u> - Profession/industry standards (such as licensing, certification, accreditation) are consistently used in planning and evaluating this program and content of its courses.</p> <p><u>Poor</u> - Little or no recognition is given to specific profession/industry standards in planning and evaluating this program.</p>							
<p>7. Use of Student Follow-Up Information</p> <p><u>Excellent</u> - Current follow-up data on completers and leavers (students with marketable skills) are consistently and systematically used in evaluating this program.</p> <p><u>Poor</u> - Student follow-up information has not been collected for use in evaluating this program.</p>							
PROCESSES							
<p>8. Adaptation of Instruction</p> <p><u>Excellent</u> - Instruction in all courses required for this program recognizes and responds to individual student interests, learning styles, skills, and abilities through a variety of instructional methods (such as small group or individualized instruction, laboratory or "hands on" experiences, open entry/open exit, credit by examination).</p> <p><u>Poor</u> - Instructional approaches in this program do not consider individual student differences.</p>							

	Poor 1	Below Expectations 2	Acceptable 3	Good 4	Excellent 5	Don't Know	Comments
<p>9. Relevance of Supportive Courses</p> <p><u>Excellent</u> - Applicable supportive courses (such as anatomy and physiology, technical communications, technical mathematics) are closely coordinated with this program and are kept relevant to program goals and current to the needs of students.</p> <p><u>Poor</u> - Supportive course content reflects no planned approach to meeting needs of students in this program.</p>							
<p>10. Coordination with Other Community Agencies and Educational Programs</p> <p><u>Excellent</u> - Effective liaison is maintained with other programs and educational agencies and institutions (such as high schools, other community colleges, four year colleges, area vocational schools, proprietary schools, CETA) to assure a coordinated approach and to avoid duplication in meeting occupational needs of the area or community.</p> <p><u>Poor</u> - College activities reflect a disinterest in coordination with other programs and agencies having impact on this program.</p>							
<p>11. Provision for Work Experience, Cooperative Education, or Clinical Experience</p> <p><u>Excellent</u> - Ample opportunities are provided for related work experience, cooperative education, or clinical experience for students in this program. Student participation is well coordinated with classroom instruction and employer supervision.</p> <p><u>Poor</u> - Few opportunities are provided in this program for related work experience, cooperative education, or clinical experience where such participation is feasible.</p>							
<p>12. Program Availability and Accessibility</p> <p><u>Excellent</u> - Students and potential students desiring enrollment in this program are identified through recruitment activities, treated equally in enrollment selection, and not discouraged by unrealistic prerequisites. The program is readily available and accessible at convenient times and locations.</p> <p><u>Poor</u> - This program is not available or accessible to most students seeking enrollment. Discriminatory selection procedures are practiced.</p>							

	Poor 1	Below Expectations 2	Acceptable 3	Good 4	Excellent 5	Don't Know	Comments
<p>13. Provision for the Disadvantaged <u>Excellent</u> - Support services are provided for disadvantaged (such as socioeconomic, cultural, linguistic, academic) students enrolled in this program. Services are coordinated with occupational instruction and results are assessed continuously. <u>Poor</u> - No support services are provided for disadvantaged students enrolled in this program.</p>							
<p>14. Provision for the Handicapped <u>Excellent</u> - Support services are provided for handicapped (physical, mental, emotional, and other health impairing handicaps) students enrolled in this program. Facilities and equipment adaptations are made as needed. Services and facilities modifications are coordinated with occupational instruction and results are assessed continuously. <u>Poor</u> - No support services or facilities and equipment modifications are available for handicapped students enrolled in this program.</p>							
<p>15. Efforts to Achieve Sex Equity <u>Excellent</u> - Emphasis is given to eliminating sex bias and sex stereotyping in this program: staffing, student recruitment, program advisement, and career counseling; access to and acceptance in programs; selection of curricular materials; instruction; job development and placement. <u>Poor</u> - Almost no attention is directed toward achieving sex equity in this program.</p>							
<p>16. Provision for Program Advisement <u>Excellent</u> - Instructors or other qualified personnel advise students (day, evening, weekend) on program and course selection. Registration procedures facilitate course selection and sequencing. <u>Poor</u> - Instructors make no provision for advising students on course and program selection.</p>							
<p>17. Provision for Career Planning and Guidance <u>Excellent</u> - Day, evening, and weekend students in this program have ready access to career planning and guidance services. <u>Poor</u> - Little or no provision is made for career planning and guidance services for students enrolled in this program.</p>							

	Poor 1	Below Expectations 2	Acceptable 3	Good 4	Excellent 5	Don't Know	Comments
<p>18. Adequacy of Career Planning and Guidance <u>Excellent</u> - Instructors or other qualified personnel providing career planning and guidance services have current and relevant occupational knowledge and use a variety of resources (such as printed materials, audiovisuals, job observation) to meet individual student career objectives. <u>Poor</u> - Career planning and guidance services are ineffective and staffed with personnel who have little occupational knowledge.</p>							
<p>19. Provision for Employability Information <u>Excellent</u> - This program includes information which is valuable to students as employees (on such topics as employment opportunities and future potential, starting salary, benefits, responsibilities and rights). <u>Poor</u> - Almost no emphasis is placed on providing information important to students as employees.</p>							
<p>20. Placement Effectiveness for Students in this Program <u>Excellent</u> - The college has an effectively functioning system for locating jobs and coordinating placement for students in this program. <u>Poor</u> - The college has no system or an ineffective system for locating jobs and coordinating placement for occupational students enrolled in this program.</p>							
<p>21. Student Follow-Up System <u>Excellent</u> - Success and failure of program leavers and completers are assessed through periodic follow-up studies. Information learned is made available to instructors, students, advisory committee members, and others concerned (such as counselors) and is used to modify this program. <u>Poor</u> - No effort is made to follow up former students of this program.</p>							
<p>22. Promotion of the Dental Hygiene Program <u>Excellent</u> - An active and organized effort is made to inform the public and its representatives (such as news media, legislators, board, business community) of the importance of providing effective and comprehensive occupational education and specific training for this occupation to gain community support. <u>Poor</u> - There is no organized public information effort for this program.</p>							

	Poor 1	Below Expectations 2	Acceptable 3	Good 4	Excellent 5	Don't Know	Comments
RESOURCES							
<p>23. Provision for Leadership and Coordination <u>Excellent</u> - Responsibility, authority, and accountability for this program are clearly identified and assigned. Administrative effectiveness is achieved in planning, managing, and evaluating this program. <u>Poor</u> - There are no clearly defined lines of responsibility, authority, and accountability for this program.</p>							
<p>24. Qualifications of Administrators and/or Supervisors <u>Excellent</u> - All persons responsible for directing and coordinating this program demonstrate a high level of administrative ability. They are knowledgeable in and committed to occupational education. <u>Poor</u> - Persons responsible for directing and coordinating this program have little administrative training, education, and experience.</p>							
<p>25. Instructional Staffing <u>Excellent</u> - Instructional staffing for this program is sufficient to permit optimum program effectiveness (such as through enabling instructors to meet individual student needs, providing liaison with advisory committees, and assisting with placement and follow-up activities). <u>Poor</u> - Staffing is inadequate to meet the needs of this program effectively.</p>							
<p>26. Qualifications of Instructional Staff <u>Excellent</u> - Instructors in this program have two or more years in relevant employment experience, have kept current in their field, and have developed and maintained a high level of teaching competence. <u>Poor</u> - Few instructors in this program have relevant employment experience or current competence in their field.</p>							
<p>27. Professional Development Opportunities <u>Excellent</u> - The college encourages and supports the continuing professional development of faculty through such opportunities as conference attendance, curriculum development, work experience. <u>Poor</u> - The college does not encourage or support professional development of faculty.</p>							

	Poor 1	Below Expectations 2	Acceptable 3	Good 4	Excellent 5	Don't Know	Comments
<p>28. Use of Instructional Support Staff <u>Excellent</u> - Paraprofessionals (such as aides, laboratory assistants) are used when appropriate to provide classroom help to students and to ensure maximum effectiveness of instructors in the program. <u>Poor</u> - Little use is made of instructional support staff in this program.</p>							
<p>29. Use of Clerical Support Staff <u>Excellent</u> - Office and clerical assistance is available to instructors in this program and used to ensure maximum effectiveness of instructors. <u>Poor</u> - Little or no office and clerical assistance is available to instructors; ineffective use is made of clerical support staff.</p>							
<p>30. Adequacy and Availability of Instructional Equipment <u>Excellent</u> - Equipment used on or off campus for this program is current, representative of that used on jobs for which students are being trained, and in sufficient supply to meet the needs of students. <u>Poor</u> - Equipment for this program is outmoded and in insufficient quantity to support quality instruction.</p>							
<p>31. Maintenance and Safety of Instructional Equipment <u>Excellent</u> - Equipment used for this program is operational, safe, and well maintained. <u>Poor</u> - Equipment used for this program is often not operable and is unsafe.</p>							
<p>32. Adequacy of Instructional Facilities <u>Excellent</u> - Instructional facilities (excluding equipment) meet the program objectives and student needs, are functional and provide maximum flexibility and safe working conditions. <u>Poor</u> - Facilities for this program generally are restrictive, dysfunctional, or overcrowded.</p>							
<p>33. Scheduling of Instructional Facilities <u>Excellent</u> - Scheduling of facilities and equipment for this program is planned to maximize use and be consistent with quality instruction. <u>Poor</u> - Facilities and equipment for this program are significantly under- or over-scheduled.</p>							

	Poor 1	Below Expectations 2	Acceptable 3	Good 4	Excellent 5	Don't Know	Comments
<p>34. Adequacy and Availability of Instructional Materials and Supplies</p> <p><u>Excellent</u> - Instructional materials and supplies are readily available and in sufficient quantity to support quality instruction.</p> <p><u>Poor</u> - Materials and supplies in this program are limited in amount, generally outdated, and lack relevance to program and student needs.</p>							
<p>35. Adequacy and Availability of Learning Resources</p> <p><u>Excellent</u> - Learning resources for this program are available and accessible to students, current and relevant to the occupation, and selected to avoid sex bias and stereotyping.</p> <p><u>Poor</u> - Learning resources for this program are outdated, limited in quantity, and lack relevance to the occupation.</p>							
<p>36. Use of Advisory Committees</p> <p><u>Excellent</u> - The advisory committee for this program is active and representative of the occupation.</p> <p><u>Poor</u> - the advisory committee for this program is not representative of the occupation and rarely meets.</p>							
<p>37. Provisions in Current Operating Budget</p> <p><u>Excellent</u> - Adequate funds are allocated in the college operating budget to support achievement of approved program objectives. Allocations are planned to consider instructor budget input.</p> <p><u>Poor</u> - Funds provided are seriously inadequate in relation to approved objectives for this program.</p>							
<p>38. Provisions in Capital Outlay Budget for Equipment</p> <p><u>Excellent</u> - Funds are allocated in a planned effort to provide for needed new equipment and for equipment replacement and repair, consistent with the objectives for this program and based on instructor input.</p> <p><u>Poor</u> - Equipment needs in this program are almost totally unmet in the capital outlay budget.</p>							

Dental Hygiene

APRC 1997-1998

Section 3 of 3

	Poor 1	Below Expectations 2	Acceptable 3	Good 4	Excellent 5	Don't Know	Comments
ADDITIONAL STANDARDS IDENTIFIED BY COLLEGE 39.							
40.							
41.							
42.							
43.							

**FERRIS STATE UNIVERSITY
DENTAL HYGIENE PROGRAM
GRADUATE QUESTIONNAIRE
1997**

1. Are you currently employed as a dental hygienist?

- 1. Yes
- 2. No

2. Which type of setting best describes your current primary place of employment? Please circle one.

- 1. Practicing in a private dental office
- 2. Practicing in a private dental office and teaching in a dental hygiene program
- 3. Practicing in a private dental office and continuing education toward an advanced degree
- 4. Continuing education toward an advanced degree
- 5. Practicing in public health
- 6. Involved in research
- 7. Practicing in an institutional/industrial setting other than those specified above
- 8. Unemployed
- 9. Awaiting opportunity to take national/state boards
- 10. Other

3. How many hours per week are you employed as a dental hygienist?

- 1. 1-8 hours
- 2. 9-16 hours
- 3. 17-24 hours
- 4. 25-32 hours
- 5. 33-44+ hours

4-8. What resources did you use to find your current job(s)?

	<u>Yes</u>	<u>No</u>
4. Ferris Placement Office	1	2
5. FSU Dental Hygiene Job Board	1	2
6. Newspaper/Journal Ads	1	2
7. Dental Hygiene Organization	1	2
8. Other		

9. If you are not currently employed, please indicate why.

- 1. Have not passed the National Board Dental Hygiene Exam
- 2. Have not passed the NERB
- 3. Could not find employment
- 4. Other

The following list describes some of the responsibilities which may be delegated to a dental hygienist in Michigan. In Column I (Importance) at the left, circle the number corresponding to the importance of each item in relation to the practice of dental hygiene. If it is not applicable, please mark NA.

- NA = Not applicable to my practice
- 1 = Not very important to my practice
- 2 = Moderately important to my practice
- 3 = Essential to my practice

In Column II (Preparation) located at the right, circle the appropriate level at which you feel the Dental Hygiene program prepared you to perform each responsibility. Please add additional comments to better express your opinion at the end of this survey.

- NA = Need not be included in the curriculum
- 1 = Need additional preparation
- 2 = Adequately prepared
- 3 = Well prepared

Column I IMPORTANCE IN MY CURRENT RDH POSITION	<u>RESPONSIBILITY</u>	Column II PREPARATION BY FERRIS STATE UNIVERSITY
	<u>Interpersonal/Professional Skills</u>	
1. NA 1 2 3	Personal appearance	NA 1 2 3
2. NA 1 2 3	Interpersonal skills (communication)	NA 1 2 3
3. NA 1 2 3	Ability to be part of the dental office "team"	NA 1 2 3
4. NA 1 2 3	Professional presence/attitude	NA 1 2 3
5. NA 1 2 3	Ability to inform and educate patient	NA 1 2 3
6. NA 1 2 3	Scores from National and/or Regional Board exams	NA 1 2 3
7. NA 1 2 3	Computer Skills	NA 1 2 3
	<u>Diagnostic/Assessment Skills</u>	
8. NA 1 2 3	Periodontal assessment and treatment planning	NA 1 2 3
9. NA 1 2 3	Ability to make dental hygiene diagnosis	NA 1 2 3
10. NA 1 2 3	Interpret radiographs	NA 1 2 3
11. NA 1 2 3	Oral pathologies assessment	NA 1 2 3
12. NA 1 2 3	Obtain a complete medical/dental history	NA 1 2 3
	<u>Performance Skills</u>	
13. NA 1 2 3	Hand scaling	NA 1 2 3
14. NA 1 2 3	Root planing	NA 1 2 3
15. NA 1 2 3	Ability to use rotary polisher	NA 1 2 3
16. NA 1 2 3	Ultrasonic scaling	NA 1 2 3
17. NA 1 2 3	Sealant placement	NA 1 2 3
18. NA 1 2 3	Ability to perform oral irrigation	NA 1 2 3
19. NA 1 2 3	Probe	NA 1 2 3
20. NA 1 2 3	Pulp vitality tests	NA 1 2 3
21. NA 1 2 3	Tooth desensitizing agents/topical anesthetics application	NA 1 2 3
22. NA 1 2 3	Topical fluoride application	NA 1 2 3
23. NA 1 2 3	Take radiographs	NA 1 2 3
24. NA 1 2 3	Polish amalgams	NA 1 2 3
25. NA 1 2 3	Temporary restorations	NA 1 2 3
26. NA 1 2 3	Alginate impressions	NA 1 2 3
27. NA 1 2 3	Pouring study models	NA 1 2 3
28. NA 1 2 3	Trimming study models	NA 1 2 3
29. NA 1 2 3	Mixing cements	NA 1 2 3
30. NA 1 2 3	Mixing and placing periodontal packs	NA 1 2 3
	<u>Management/Systems Skills</u>	
31. NA 1 2 3	Equipment and supplies maintenance	NA 1 2 3
32. NA 1 2 3	Autoclave/asepsis equipment use	NA 1 2 3
33. NA 1 2 3	Aseptic technique	NA 1 2 3

Please list any strengths and/or weaknesses about the entire program (consider specific courses and content, level of instruction, sequence of courses, patient experiences, equipment, faculty, staff, professionalism, student organizations, SADHA & Pi Delta Alpha, etc.).

Please identify the most underused and costly item that you purchased for use in the program.

Please list the textbooks you used the most or were the most helpful to you.

Please list the textbooks you used the least or were not very helpful to you.

Please give suggestions for changes you would recommend that you feel would improve the Dental Hygiene Program at Ferris.

Please note below any address changes.

Thank you for your time and participation in completing this survey.

FERRIS STATE UNIVERSITY DENTAL HYGIENE PROGRAM EMPLOYER SURVEY

The following list describes some of the responsibilities which may be delegated to a dental hygienist in Michigan. In Column I (Importance) at the left, circle the number corresponding to the importance of each item in relation to the practice of dental hygiene in your office. If it is not applicable, please mark NA.

- NA = Not applicable to my practice
 1 = Not very important to my practice
 2 = Moderately important to my practice
 3 = Essential to my practice

In Column II (Preparation) located at the right, circle the appropriate level at which you feel the FSU graduate hygienist you employ performs each responsibility. Please add additional comments to better express your opinion at the end of this survey.

- NA = Need not be included in the curriculum
 1 = Need additional preparation
 2 = Adequately prepared
 3 = Well prepared

If more than one Ferris graduate has been employed in your practice, please reflect an average of their skill levels in Column II. ***Please answer the following questions only as they relate to the Ferris State University graduates employed within the last five years.***

Column I		Column II
IMPORTANCE TO MY	<u>RESPONSIBILITY</u>	PREPARATION BY
CURRENT HYGIENIST		FERRIS STATE
POSITION		UNIVERSITY
	<u>Interpersonal/Professional Skills</u>	
1. NA 1 2 3	Personal appearance	NA 1 2 3
2. NA 1 2 3	Interpersonal skills (communication)	NA 1 2 3
3. NA 1 2 3	Ability to be part of the dental office "team"	NA 1 2 3
4. NA 1 2 3	Professional presence/attitude	NA 1 2 3
5. NA 1 2 3	Ability to inform and educate patient	NA 1 2 3
6. NA 1 2 3	Scores from National and/or Regional Board exams	NA 1 2 3
7. NA 1 2 3	Computer Skills	NA 1 2 3
	<u>Diagnostic/Assessment Skills</u>	
8. NA 1 2 3	Periodontal assessment and treatment planning	NA 1 2 3
9. NA 1 2 3	Ability to make dental hygiene diagnosis	NA 1 2 3
10. NA 1 2 3	Interpret radiographs	NA 1 2 3
11. NA 1 2 3	Oral pathologies assessment	NA 1 2 3
12. NA 1 2 3	Obtain a complete medical/dental history	NA 1 2 3

**Column I
IMPORTANCE TO MY
CURRENT HYGIENIST
POSITION**

RESPONSIBILITY

**Column II
PREPARATION BY
FERRIS STATE
UNIVERSITY**

		<u>Performance Skills</u>	
13.	NA 1 2 3	Hand scaling	NA 1 2 3
14.	NA 1 2 3	Root planing	NA 1 2 3
15.	NA 1 2 3	Ability to use rotary polisher	NA 1 2 3
16.	NA 1 2 3	Ultrasonic scaling	NA 1 2 3
17.	NA 1 2 3	Sealant placement	NA 1 2 3
18.	NA 1 2 3	Ability to perform oral irrigation	NA 1 2 3
19.	NA 1 2 3	Probe	NA 1 2 3
20.	NA 1 2 3	Pulp vitality tests	NA 1 2 3
21.	NA 1 2 3	Tooth desensitizing agents/topical anesthetics application	NA 1 2 3
22.	NA 1 2 3	Topical fluoride application	NA 1 2 3
23.	NA 1 2 3	Take radiographs	NA 1 2 3
24.	NA 1 2 3	Polish amalgams	NA 1 2 3
25.	NA 1 2 3	Temporary restorations	NA 1 2 3
26.	NA 1 2 3	Alginate impressions	NA 1 2 3
27.	NA 1 2 3	Pouring study models	NA 1 2 3
28.	NA 1 2 3	Trimming study models	NA 1 2 3
29.	NA 1 2 3	Mixing cements	NA 1 2 3
30.	NA 1 2 3	Mixing and placing periodontal packs	NA 1 2 3
		<u>Management/Systems Skills</u>	
31.	NA 1 2 3	Equipment and supplies maintenance	NA 1 2 3
32.	NA 1 2 3	Autoclave/asepsis equipment use	NA 1 2 3
33.	NA 1 2 3	Aseptic technique	NA 1 2 3

Have you ever hired a dental hygienist who had graduated from the Ferris State University Dental Hygiene Program? Yes No

If so, were you satisfied with this employee? Yes No

When you are making a dental hygienist hiring decision, would you choose a Ferris graduate over a graduate from another program? Yes No Doesn't matter

Your year of graduation from Dental School _____

Type of practice (general practice or specialty)? _____

Additional Comments: _____

Thank you for completing this survey. Please return it in the enclosed self addressed envelope.

**ADVISORY COMMITTEE PERCEPTIONS OF THE
DENTAL HYGIENE PROGRAM
COLLEGE OF ALLIED HEALTH SCIENCES
1997**

INSTRUCTIONS: Rate each item using the following guide: <i>EXCELLENT</i> means nearly ideal, top 5 to 10% <i>GOOD</i> is a strong rating, top one-third <i>ACCEPTABLE</i> is average, the middle-third <i>BELOW EXPECTATIONS</i> is only fair, bottom one-third <i>POOR</i> is seriously inadequate, bottom 5 to 10% <i>A comment column has been provided if you wish to explain your rating.</i>	Poor	Below Expectations	Acceptable	Good	Excellent	Don't Know	COMMENTS
	1	2	3	4	5		
Please rate each item below:							
1. Instructional program content and quality are: <ul style="list-style-type: none"> • Based on performance objectives that represent job skills and knowledges required for successful entry level employment. 							
<ul style="list-style-type: none"> • Designed to provide students with practical job application experience. 							
<ul style="list-style-type: none"> • Responsive to upgrading and retraining needs of employed persons. 							
<ul style="list-style-type: none"> • Periodically reviewed and revised to keep current with changing job practices and technology. 							
2. Instructional equipment is: <ul style="list-style-type: none"> • Well maintained. 							
<ul style="list-style-type: none"> • Current and representative of that used on the job. 							
3. Instructional facilities: <ul style="list-style-type: none"> • Provide adequate lighting, ventilation, heating, power, and other utilities. 							
<ul style="list-style-type: none"> • Allocate sufficient space to support quality instruction. 							
<ul style="list-style-type: none"> • Meet essential health and safety standards. 							
4. Placement: <ul style="list-style-type: none"> • Services are available to students completing the program. 							
<ul style="list-style-type: none"> • Job opportunities exist for students completing the program or leaving with marketable skills. 							
5. Follow-up studies on program completers and leavers (students with marketable skills): <ul style="list-style-type: none"> • Demonstrate that students are prepared for entry level employment. 							
<ul style="list-style-type: none"> • Collect information on job success and failure of former students. 							
<ul style="list-style-type: none"> • Provide information used to review and, where warranted, revise the program. 							

APPENDIX F

SANDRA GEORGE BURNS
14145 - 205th Ave.
Big Rapids, MI 49307

EDUCATION:

FERRIS STATE UNIVERSITY
A.A.S. in Nursing, May 10, 1997
Registered Nurse License #4704212981

UNIVERSITY OF MICHIGAN
M.S. in Dental Hygiene, Aug. 1978
Thesis - Evaluation of Bitewing Trainer

FERRIS STATE UNIVERSITY
B.S. in Allied Health Education, June, 1975
A.A.S. in Dental Hygiene, June, 1971
Registered Dental Hygiene License #290200254
Registered Dental Assistant License #290300650

MONTCALM COMMUNITY COLLEGE
Pre-science, 1968-1969

UNIVERSITY OF KENTUCKY-SCHOOL OF DENTISTRY
Advanced Radiology for D.A. Instructors, June, 1989

TEACHING EXPERIENCE:

FERRIS STATE UNIVERSITY
1987-Present
Associate Professor

ASHEVILLE-BUNCOMBE TECHNICAL COLLEGE
Asheville, North Carolina 28803
1986 - Dental Hygiene Instructor

AFTERCARE-PRERELEASE CENTER
Asheville, North Carolina
Prison System
Nutrition Instructor

FERRIS STATE UNIVERSITY
1980-1984
Instructor - Part-Time
Dental Hygiene Program

LANSING COMMUNITY COLLEGE
Lansing, Michigan
1978-1982
Instructor - Oral Pathology, Radiology

**TEACHING EXPERIENCE:
(con't)**

UNIVERSITY OF MICHIGAN

Ann Arbor, Michigan

1977-1978

Graduate Teaching - Dental Anatomy, Head and Neck
Anatomy, Pre-Clinic and Clinic

FERRIS STATE UNIVERSITY

1974-1975 - Part-time Instructor - Clinic

1975-1976 - Full-time Instructor - Radiology, Dental
Materials, Pre-Clinic and Clinic

**DENTAL HYGIENE
EXPERIENCE:**

JOHN GARLICK

Big Rapids, Michigan 49307

Substitute - Dental Hygiene

RONALD LEYDER, D.D.S.

Newaygo, Michigan 49337

Dental Hygiene - 1986

ROBERT POWELL, D.D.S.

Asheville, North Carolina 28801

Dental Hygiene and assistant - 1985-86

DANIEL AND OLIN COX, D.D.S.'s

Ypsilanti, Michigan

Dental Hygiene - 1978-80

DOUGLAS GRAY, D.D.S.

Mason, Michigan 48854

Dental Hygiene - 1977

BARRY D. HILLIGAN, D.D.S.

Portland, Michigan

Dental Hygiene - 1973-74

R. R. DEMARTIN, D.D.S.

Mason, Michigan 48854

Dental Hygiene - 1972-74

THOMAS HOPP, D.D.S.

Mason, Michigan 48854

Dental Hygiene - 1971-72

JOHN B. MEADE, D.D.S.

Lansing, Michigan 48933

Dental Hygiene - 1971-72

PROFESSIONAL:

Registered Dental Hygienist
State of Michigan - Licensure
1971-Present (maintain 12 C.E. hours/year)

Registered Dental Assistant
State of Michigan - Licensure
1982-Present (maintain 12 C.E. hours/year)

Certified Dental Assistant
Dental Assisting National Board
1976-Present (maintain 12 C.E. hours/year)

American Red Cross Certification
Certified Nutritional Instructor
Certified in CPR and First Aid
CPR - Certification required for licensure renewal in State
of Michigan

Member of the following:
American Association of Public Health Dentistry
American Dental Hygiene Association
Michigan Dental Hygiene Association
Grand Rapids Dental Hygiene Association
American Association of Dental Schools
Periodontal Study Club
Sigma Phi Alpha - Alpha Nu Chapter

PROFESSIONAL ACTIVITIES: FERRIS STATE UNIVERSITY

Semester Conversion Committee

Program Review Chairman - Dental Assisting

Recruiting Committee - Various open house activities,
Autumn Adventure and site visits

Presenter at Alumni continuing education programs
offered by Dental Department.

Advisor to 1st year Dental Hygiene Class-2
Advisor to 2nd year Dental Hygiene Class-2

Coordinated site for Student American Dental Hygiene
Association to volunteer.

Coordinator for Shadowing MOISD Program - Mecosta-
Osceola Intermediate School District

PROFESSIONAL ACTIVITIES: Coordinator for Community Dental Health
(con't) Site Visit - approximately 100 sites
Big Rapids Public Schools
Chippewa Hills Public Schools
Morley-Stanwood Public Schools
Hersey Elementary
Mecosta County Parochial Schools
Big Jackson and Pineview
Headstart and Pre-School Programs
Area Nursing Homes and Hospitals
Area AIS Home for Handicapped
Senior Meal Sites
Alternative School
Hearing and Emotionally Impaired
Community Mental Health
Eagle Village

Presenter: Monday Night Technology Program
Won "Education Excellence Award" from Michigan
Association of School Boards

FERRIS STATE UNIVERSITY

Consultant to American Dental Association
Commission on Dental Education - 1980-84

Consultant to Lansing Community College
Curriculum Review for Accreditation - 1980

National Dairy Council - Committee member
Research Symposium on Nutrition and Dental Health -
November, 1990

Coordinated Televideo Conference
Working Together for Healthy Children
Sponsored by National Dairy Council of
Michigan and Michigan State University

**PROFESSIONAL
DEVELOPMENT:**

I attend several continuing education programs each
year. Continuing education is now required for renewal of
licenses in Dental Hygiene and Dental Assisting in the
State of Michigan.

The following areas of continuing education are just a few
of the seminars I have attended:

Radiology - University of Michigan
University of Kentucky

**PROFESSIONAL
DEVELOPMENT: (con't)**

Special Needs Patients - Academy of Dentistry for
the Handicapped

Pathology - University of Michigan

Geriatric - Participated in a National Workshop
sponsored by the American Association of Dental
Schools. Michigan Academy of Dentistry

AIDS - Michigan Dental Hygiene Association

Asepsis - Molinari - University of Detroit
- Latex Allergies
- Forensic Dentistry
- Preventive Therapy

Nutrition - Central Michigan University
Michigan Dental Hygiene Association

Occupation Hazards Update - Michigan Dental
Association

Pharmacology - Periodontal Study Club

Periodontology - Periodontal Study Club

Antimicrobial Therapy - Consulting Concepts

Implants Update - Periodontal Study Club

PUBLIC SERVICE:

BIG RAPIDS HEALTH ADVISORY COMMITTEE

1989-Present

Committee Review of Health Curriculum in Big Rapids
Public Schools

GIRL SCOUT EVENTS COORDINATOR

Coordinated events on FSU campus

Careers in Allied Health and Pharmacy

Celebrate Women in Science and Math

Attendance - Approximately 200 Girl Scouts at both
events

GIRL SCOUT TROOP LEADER

Hillcrest 3rd Grade Troop

Summer Day Camp Leader - Schoolsection Lake

CAROL J. COLLINS
630 River Street
Big Rapids, MI 49307
Telephone: (616) 796-4934

WORK EXPERIENCE:

- 1994 - Present Ferris State University
Clinical Dental Hygienist
Duties: Teaching dental hygiene students the clinical aspects and practice of dental hygiene.
- 1996 Ron Yaros, D.D.S.
Clinical Dental Hygienist
Hired for one month replacement during the summer to specifically administer anesthesia while practicing dental hygiene.
- 1995 Dr. David Ronning and Dr. Green
Clinical Dental Hygienist
Summer replacement
- 1993 - 1994 John Schondelmayer, D.D.S.
Dental Hygienist
Duties: General hygiene, scaling, and root planing.
Reason for leaving: Took a more challenging position.
- 1989 - 1993 Ronald Yaros, D.D.S.
Dental Hygienist
Duties: Senior hygienist spearheading a perio oriented practice. Focusing on patient education as the primary objective while introducing special appliances such as the Rotodent, Interplak toothbrushes, Retardent toothpaste, and any other tools necessary in helping maintain good oral hygiene. Other responsibilities include administering anesthesia, ordering hygiene supplies, and working recall.
Reason for leaving: Moved from state.

Note: During semester breaks and vacations, I work as a temporary hygienist for regional dental offices. I have worked with Dr. John Garlick, Dr. Robert Sharp, and many others.

EDUCATION:

- Present Bachelor's Degree in Visual Communication
Ferris State College, Big Rapids, Michigan
Projected graduation: 1999
- 1982 Illinois Central College, East Peoria, Illinois
Associate Degree in Science
- 1979 Ferris State University, Big Rapids, Michigan
Associate Degree in Science
- 1979 Loyola University for Dental Assisting

COMMITTEES: Unit Action Plan Committee

SEMINARS AND PROGRAM PRESENTATIONS:

Managed radiology refresher portion of a Refresher and Certification course, 1997.

CONTINUING EDUCATION:

- 1997 Radiography and Oral Pathology, Ferris State University
- 1996 Local Anesthesia Continuing Education Course, Johnson Community College
- 1995 New Aspects in Dentistry Continuing Education Course, Ferris State University
- 1995 Coaching and Team Building Skills for Managers and Supervisors, Ferris State University
- 1995 Advanced Ultrasonics Lecture Continuing Education Course, Ferris State University
- 1994 Michigan Dental Hygiene Educators Conference, Continuing Education Course
- 1993 Review of Local Anesthesia for Dental Hygienists, University of Colorado Dental School
- 1991 Intraoral Radiographic Technique, University of Colorado, School of Dentistry
- 1990 Update in Periodontal Diagnostics and Oral Hygiene, University of Colorado, School of Dentistry
- 1988 Chemotherapeutic Treatment of Periodontal Diseases, University of Colorado Dental School
- 1987 Anesthesiology course for certification, University of Colorado Dental School
- 1985 People Power C-III, Pacific Institute for Health Professionals
- 1984 Sales Communication in Dentistry, Pacific Institute for Health Professionals
- 1984 People Power, Pacific Institute for Health Professionals
- 1983 "Root Planing and the Dental Hygienist" course given by Dr. Mark K. Shimoda, Periodontist

VOLUNTEER EXPERIENCE:

Advisor for Pi Delta Alpha
Served as a judge for Children's Dental Health Week
Boy Scouts

NANCY M. FOSTER, R.D.H., B.S.
7566 E. M-115
CADILLAC, MI 49601
(616) 775-7120

WORK EXPERIENCE:

Business Owner - 2 years: PNG Services Inc., DBA Peak Performers. Peak Performers provides staffing for dental offices in 35 counties in Northwestern Michigan. It is a franchise of Peak Performers Franchise Corporation, Livonia established 1990. Duties include telemarketing, advertising, bookkeeping, developing, and maintaining a customer base, establishing and maintaining personnel files, office profiling, interviewing prospective employees, personality profiles, reference checks, and quality confirmations.

Educator: Five and one half years as a Clinical Laboratory Technician in the Dental Hygiene and Dental Assisting Programs, Ferris State University. Duties included small group instruction, designing testing instruments, assisting in the criteria for grading and maintaining records of requirements and grades. Supervising students in patient care in the clinic setting. Designing and maintaining an inventory system for clinic supplies.

Dental Auxiliary: Twenty years of experience as a Dental Assistant, Dental Hygienist, and Dental Office Manager in a variety of general and specialty offices.

**ADDITIONAL
EXPERIENCE:**

Class Advisor, Dental Hygiene Class of 1993-94, 1997-98.

Member of Alumni Advisory Board, Ferris State University, 1991-92.

Guest Lecturer, Ferris State University, Dental Hygiene and Assisting classes, 1992-95.

Part-time Adjunct Faculty, Grand Rapids Community College, 1996.

EDUCATION:

Berkley High School, Diploma, June, 1971

Ferris State College, Associate of Applied Science, Dental Hygiene, May, 1974

Ferris State University, Bachelor of Science-Allied Health Education, December, 1993

**SEMINARS
PRESENTED:**

Interviewing Techniques: Grand Rapids Community College
and Ferris State University students, March 1994 - May 1996

Boosting Team Esteem: Mt. Pleasant Dental Hygiene Society,
February, 1995

Radiology Update and New Technologies: MDHA Annual
Session, May, 1995

Radiography Refresher and Certification, June 1997, August,
1997

Incorporating Technology into Your Practice, August, 1997

**CONTINUING
EDUCATION:**

Pharmacology update: March, 1997

**VOLUNTEER
EXPERIENCE:**

Northern District Fair, Cadillac, MI, 1989 - Present

St. Mary's Episcopal Church, 1975 - Present

Diocese of Western Michigan, 1982 - Present

DALE WALTER HARRISON
18730 Grass Lake Road
Big Rapids, MI 49307-9339

WORK EXPERIENCE:

March 1993 - Present

Ferris State University, Big Rapids, Michigan
Head, Allied Dental Department
Dental Technology and Dental Hygiene Programs,
Associate Professor

Responsibilities: Supervise faculty and staff of Dental Technology and Dental Hygiene Programs, budget preparation and management, schedule and conduct program and department meetings, preparation of class and faculty schedules, accreditation documentation and reports, curriculum review and development, dental technology and hygiene student advising, recruitment and retention, represent allied dental programs and the University at professional meetings and function. Member: College of Allied Health Sciences Administrative Council.

August 1990 - Present

Ferris State University, Big Rapids, Michigan
Program Director, Dental Technology, Associate Professor

Responsibilities: Supervise faculty, financial and administrative/educational process of the program. Recruit and advise students enrolled in the Dental Technology Program.

July 1989 - July 1990

The People to People Health Foundation (Project HOPE),
Millwood, Virginia at Escola Superior de Medicina Dentaria de
Lisboa, Cursos Formacao Profissional, Universidade de
Lisboa, Lisboa, Portugal. Coordinator, Dental Laboratory
Technology Program, Project HOPE - Portugal. Professor,
Escola Superior de Mediciana Dentaria de Lisboa (ESMDL),
Universidade de Lisboa, Lisboa, Portugal.

Responsibilities: Supervise faculty, coordinate curriculum development, to act as liaison between Project HOPE and ESMDL dental faculty, staff, and administration, and serve as mentor to the Portuguese dental technology faculty. Serve as clinical coordinator between the Estagio (internship), dental school faculty, and clinical dental students. Teach dental prosthetic courses for the dental technology program and pre-clinical dental students at ESMDL.

August 1988 - July 1989

Ferris State University, Big Rapids, Michigan
Acting Program Director, Dental Technology Program

Responsibilities: Supervise faculty, financial and administrative/educational process of program. Recruit and advise students enrolled in the Dental Technology Program.

WORK EXPERIENCE: (con't)

August 1986 - July 1990
with Leave of Absence
July 1989 - July 1990

Associate Professor, Dental Technology Program

Responsibilities: Teach courses in Basic Removable Prosthodontics, Complete Dentures, and Partial Dentures.
Chairperson: Faculty/Staff Development Committee.
Member: Faculty Enrichment Committee and Student Life Committee, School of Allied Health; Curriculum Task Force, Ferris State University. Faculty Advisor: Pi Delta Alpha, Professional Dental Fraternity. Academic Advisor: Dental Technology students.

March 1978 - July 1986

Lewis and Clark Community College, Godfrey, Illinois
Coordinator and Assistant Professor, Dental Laboratory
Technology Program

Responsibilities: Developed curriculum, designed facilities, identified and ordered equipment and supplies, interviewed and hired faculty, interviewed and selected students, implemented program, wrote self-studies for the Commission on Dental Accreditation of the American Dental Association and achieved "preliminary provisional approval" status for the dental technology program in February, 1979 and "approval" status in May, 1980. Served on Learning Resource Committee, 1979-80 and Instructional Committee, 1981-84. Served on the Southern Illinois Health Occupations Articulation Project, 1982-83. Taught courses in Complete Dentures, Partial Dentures, Crown and Bridge, Dental Ceramics, Dental Materials, Dental Technology Orientation, Dental Technology Seminar, and Laboratory Internship. Guest lectured at Southern Illinois University, School of Dental Medicine and the Lewis and Clark Community College, Dental Assistant Program. Organized, developed, and produced numerous 35mm slide presentations for the Dental Technology and Dental Assistant programs. Academic Advisor: Dental technology students and LCCC Mentor Program. Advisor: Dental Technology Advisory Committee and Dental Technology Student Club.

February 19, 1958 -
March 1, 1978

United States Air Force
Honorably retired on March 1, 1978 as Master Sergeant

Volunteer teacher of English Conversation at Airaku-en Hospital for Hansen's Disease (Leprosy), Airaku-en, Okinawa, 1967 - 1969.

EDUCATION:

Southern Illinois University, Carbondale, Illinois
Master of Science in Education, 1986
Bachelor of Science in Occupational Education, 1977

**EDUCATION:
(Military)**

United States Air Force, Military Airlift Command, Norton AFB,
San Bernadino, California
Non-Commissioned Officer Academy, 1974

United States Air Force Medical Service School, Gunter AFB,
Montgomery, Alabama
Crown and Fixed Partial Denture Prosthetics Course, 1964.
Complete Denture Prosthetics Course, 1962.

United States Air Force School of Aviation Medicine, Air
University, Gunter AFB, Montgomery, Alabama
Apprentice Dental Laboratory Specialist Course, 1958.

HONORS:

Inducted into The Honor Society of Phi Kappa Phi, 1986.
Dean's List: 1975-1977.

CERTIFICATION:

Certified by the National Board for Certification in Complete
Dentures, Partial Dentures, Crown and Bridge, and Ceramics,
1971 - Present.

**PROFESSIONAL
MEMBERSHIPS:**

Society of Dental Technologists - Illinois and Missouri, a
National Board for Certification Study Group. President: 1979,
1980, and 1985.

Phi Kappa Phi Honor Society, 1986 - Present.

Michigan Association of Commercial Dental Laboratories,
Associate II Membership, 1990 - Present.

National Association of Dental Laboratories, Educators
Membership, 1992 - Present.

American Association of Dental Schools, 1990 - Present.
1992 - 1993, Delegate and Secretary, Council of Allied
Dental Program Directors.
1993 - 1994, Delegate and Chair-Elect, Council of Allied
Dental Program Directors.
1994 - 1995, Delegate and Chair, Council of Allied
Dental Program Directors.
1997, Delegate, Council of Allied Dental Program
Directors, Dental Laboratory Technology Education.
1992 - 1995, Member of the Harry Bruce Legislative
Fellowship Committee, AADS and Member of the
Sections on Dental Laboratory Technology Education
and Removable Prosthodontics.

ANNETTE URSULA JACKSON
229 Mill Street
Big Rapids, MI 49307

WORK EXPERIENCE:

- Sept. 1994 - Present **Clinical Laboratory Coordinator**, Ferris State University,
Big Rapids, MI 49307
- Sept. 1991 - Sept. 1994 **Clinical Laboratory Technician**, Ferris State University,
Big Rapids, MI 49307
- Sept. 1982 - 1991 **Part-Time Clinical Faculty**, Ferris State University,
Big Rapids, MI 49307
- Jan. 1980 - May 1982 **Teaching Assistant**, Ferris State University,
Big Rapids, MI 49307
- Sept. 1988 - Summer 1990 **Part-Time Dental Hygienist**, Donald French, D.D.S.,
Big Rapids, MI 49307
- Summer 1981 **Part-Time Dental Hygienist**. John L. Kropf, D.D.S.,
Grand Rapids, MI
- Feb. 1978 - Jan. 1980 **Dental Hygienist**, Family Health Care, Baldwin, MI 49304
- June 1976 - Feb. 1978 **Part-Time Dental Hygienist**, Kirkwood Faber, D.D.S.,
Greenville, MI 48838
- Oct. 1976 - 1977 **Part-Time Dental Hygienist**, Alan C. Havens, D.D.S.,
Greenville, MI 48838
- Sept. 175 - May 1976 **Part-Time Dental Assistant**, Burton Douglass, D.M.D.,
Big Rapids, MI 49307
- Summer 1975 **Dental Hygienist**, Northwest Michigan Migrant Health
Services, Inc., Traverse City, MI 49684
- June 1974 - Aug. 1974 **Receptionist**, Jack A. Carlson, D.D.S., Rockford, MI 49341
- Sept. 1972 - July 1973 **Dental Assistant**, Dr. Walter Schottl, Schuhstrasse 14,
Erlangen, Germany

Areas of Special Competence: Treating patients with advanced diseases, dental emergencies, OSHA law, demonstration of technique of basic and advanced instrumentation, radiology, demonstration of technique involving radiology, supervision and instruction of students in clinical settings. I have focused on treatment of the mentally and physically disabled patients.

EDUCATIONAL BACKGROUND:

Summer 1993	University of Kentucky, Advanced Radiology
May, 1995 (High Distinction)	Ferris State University, Teacher Education, Baccalaureate degree
May, 1976 (Distinction)	Ferris State University, Dental Hygiene, A.A.S. degree

ACADEMIC COMMITTEES: Health and Safety Committee, 1996-97.

PROFESSIONAL ASSOCIATIONS:

1996 - Present	OSAP
1991 - Present	American Dental Hygienists' Association
1991 - Present	Michigan Dental Hygienists' Association
1991 - Present	Grand Rapids Dental Hygienists' Society
1991 - 1993	American Association of Dental Schools

CONTINUING EDUCATION: All records kept on continuing education previous to 1986 were lost in a flood. Information regarding post-graduate course work after 1986 is available upon request. Most course work was in OSHA law, radiology, dental emergency training, and dental hygiene related topics.

ACTIVITIES:

Advisor, Phi Delta Alpha, Ferris State University, 1993-94.

Created Clinic Emergency Action Plan, Ferris State University, 1992.

Sunday School Teacher, St. Peter's Lutheran Church and School, 1989-93.

Girl Scout Troop Leader, Big Rapids, 1987-1992.

Alumni Scholarship Recipient, Ferris State College, 1974.

LINDA MEEUWENBERG, R.D.H., M.A., M.A.

HOME ADDRESS

11743 Pierce Road
Stanwood, MI 49346
(616) 972-4489

OFFICE ADDRESS

Ferris State University
College of Allied Health Sciences
VFS 315
200 Ferris Drive
Big Rapids, MI 49307
(616) 592-2309
FAX (616) 592-3788

TEACHING EXPERIENCE

Ferris State University - Professor - 1994 to Present
Dental Hygiene Program/Continuing Education Coordinator -
1993-1994
Professor 1991
Associate Professor - 1987-1991
Assistant Professor - 1982-1986
Technical Instructor - 1977-1982
Clinical Instructor - 1976-1977 (Part-time)

OTHER PROFESSIONAL EXPERIENCE

Professional Development Associates, Inc., President, 1987 - Present
Consultant - West Michigan Migrant Dental Health Program, 1985- Present
Independent Consultant - Carlson Learning Company, 1994 - present
Dental Hygienist - Various dental offices throughout Michigan, 1968 - Present

EDUCATION

Michigan State University, M.A. - Communication - 8/90
Central Michigan University, M.A. - Guidance & Counseling - 8/82
Ferris State University, B.S. - Allied Health Teacher Education - 12/78
Ferris State University, A.A.S. - Dental Hygiene - 6/68

COMMITTEES AT FERRIS STATE UNIVERSITY

FSU Faculty Professional Enrichment
International Education
College of Allied Health Continuing Education Task Force
College of Allied Health Honors
College of Allied Health Instructional Resources
College of Allied Health Non-Clinical Core Task Force
Dental Hygiene Program Curriculum
Allied Dental Department Unit Action Plan
Allied Dental Annual Alumni Reception

PAPER PRESENTATIONS

The Use of Videotaping, Self, and Peer Evaluation for Teaching Patient Centered Counseling Approaches, Paper presented at the American Association of Dental Schools Annual Session, New Educational Program Presentations - 1986.

The Use of Journal Writing for Enhancing Clinical Instruction, Paper presented at the American Association of Dental Schools Annual Session, New Educational Program Presentations - 1987.

A Rationale and Model for Teaching Communication Skills that Improve Patient Provider Relationships, American Society for Allied Health Professions, Orlando, Florida - 1992.

EDUCATIONAL EXHIBITS & TABLE CLINIC PRESENTATIONS

A Model for Teaching Patient Centered Counseling, Educational Exhibit, American Association of Dental Schools Annual Session, Chicago, IL, 1986.

Communication Techniques for the Dental Office, Table Clinic presentation at the Annual Session of the Michigan Dental Association, 1986.

Nonverbal Communication - Are You Scaring Your Patients Away? Table Clinic presentation at the Annual Session of the Michigan Dental Association, 1987.

Communication Techniques for the Dental Office, Table Clinic presented at the Annual Session of the National Dental Association, 1987.

A Model for Teaching Patient Centered Counseling, Educational Exhibit presented at the Annual Session of the American Association of Dental Schools, 1987.

A Model to Build Writing and Language into the Curriculum, Educational Exhibit, with Nancy Fellows, Presented at the Annual Session of the American Association of Dental Schools.

Communication Strategies for Compliance Gaining, Table Clinic presented at the Michigan Dental Association Annual Meeting - 1990.

The Use of IntraOral Photography for Enhancing Clinical Education. Poster session presented at Dental Hygiene Program Directors' Annual Session, Tempe, AZ, 1995.

Improving Patient Relations, Table Clinic presentation at the Annual Session of the Wisconsin Dental Association, 1993.

Improving Patient Relations - It's a Team Matter, Michigan Dental Association, 1994.

Powerful Communication for Women - Marketing Strategies, Professional Development Conference for Women, Clemson University.

Postural Stress - Implications for the Dental Team, Michigan Dental Association Annual Session, May, 1995.

The Use of Behavioral Profiles for Creating the Office Team, Table Clinic presented at Michigan Dental Association Annual Session, 1996.

Dental Office Ergonomics, Table Clinic presentation at Michigan Dental Association Annual Session, 1997.

Office Ergonomics - Don't Let the Way You Sit Get You Down, Technical Exhibit, Facilities Management Student Association Annual Technology Conference, Ferris State University, 1996.

POSTER SESSIONS

The Use of Writing to Foster Faculty/Student Relationships, American Society for Allied Health Professions, Orlando, Florida, 1992.

An Investigation of the Use of Writing to Increase Student Participation in Clinic Theory Courses, American Dental Hygienists Association, Annual Session, Denver, CO, 1993.

Continuing Education as a Means to Create External Funding, National Dental Hygiene Director's Meeting, Cancun, Mexico, June, 1994.

The Incorporation of Technology into Dental Hygiene Education, Poster session presented at American Dental Hygiene Association Annual Session, 1996.

The Use of Behavioral Profiles to Enhance Classroom Instruction, presented at American Dental Hygienists Association Annual Session, 1997.

The Incorporation of Technology into Dental Hygiene Education, presented at Dental Hygiene Directors' Conference, 1997.

PUBLICATIONS

Adherence to Daily Self Care Regimens for the Developmentally Disabled, Access, August, 1994.

Patient Informing and Motivating Skills, Journal of Practical Hygiene (in progress).

Gaining Adherence to Daily Treatment Regimens, Compendium of Oral Hygiene (in progress).

Incorporation of Technology into Dental Hygiene Education, Education Update, 1996.

Ergonomics and the Practice of Dentistry - Ergonomic Seating, Magnification, and Illumination Systems, Amalgam Carrier published by Michigan Academy of General Dentistry, 1997.

Communication and Interviewing Skills for the New Dental Client (accepted for publication by the Amalgam Carrier) to be published fall/winter, 1997.

Use of Behavioral Profiles in the Classroom (submitted to ADHA for publication in Education Update, 1997.

PROFESSIONAL AFFILIATIONS:

Association of Dental Implant Auxiliaries and Practice Managers (Board of Directors)
International Congress of Oral Implantologists - Fellow
American Dental Hygienists Association
Michigan Dental Hygienists Association
Grand Rapids Dental Hygienists Association - Delegate to MDHA
Michigan Dental Hygiene Educators
National Speakers' Association
Michigan Sepakers' Association
National Association of Female Executives
Ferris Professional Women
Mecosta County Area Chamber of Commerce

PROFESSIONAL AFFILIATIONS: (con't)

Ferris State University Alumni Association
National Organization for Women
Sigma Phi Alpha
International Federation of Dental Hygienists
National Education Association
Professional Women's Network
Rotary International

SEMINARS & SHORT PROGRAM PRESENTATIONS

Provide numerous presentations each year at various dental association meetings and college continuing education departments.

Sample:

Michigan Dental Hygienists Association
Washington Dental Hygienists Association
International Congress of Oral Implantologists
Association of Dental Implant Auxiliaries and Practice Managers
Michigan Dental Association
Various Michigan Dental Association Component meetings
Various Michigan Dental Hygienists Association Component meetings
Virginia Dental Hygiene Association
Wichita Dental Society
American Dental Hygienists Association
New Orleans Dental Hygienists Association
Delta College
Lansing Community College
Muskegon Community College
State University of New York at Buffalo
Old Dominion University
Ferris State University

RECENT CONTINUING EDUCATION: (1996/97)

Health Futures Conference, Ferris State University, 1997
FSU Timme Center for Teaching and Learning (3 mini presentations)
First Annual Summer Faculty Institute, 1996
Computers and Technology in the Classroom, Ferris State University, 1997
Computer Resource Room Training, CAHS, 1996
Drugs Patients Take, Ferris State University, 1997
Peer Review in Teaching Workshop, Ferris State University, 1997
Diversity Issues in the Workplace, Ferris State University, 1997
Adventures in Attitudes, Trainer Certification, Carlson Learning Company, 1997
Stress Management for Women, 1997
Overcoming Negativity in the Workplace, 1997
Oral Radiography and Oral Pathology, A Comprehensive Review, 1997
Incorporating Technology into Your Practice, 1997
Exceptional Customer Service, 1997
Annual Business Breakfast Meeting, 1997
Ferris Professional Women's Conference, 1996/97
Formulating the Dental Hygiene Diagnosis, 1997
Dental Hygiene - The Ultimate Practice Builder, 1997
Changing Paradigms in Dental Hygiene Therapeutic Regimens, 1996
Periodontal Assessment and Diagnostic Decision Making, 1996
Chicago Midwinter Dental Meeting, 1996/97
Michigan Dental Association and Michigan Dental Association Annual Session, 1996/97

VOLUNTEER SERVICES

Girl Scouts of America, career exploration
Mecosta County Seniors Programs (speaker for annual sessions)
Stroke Support, Mecosta County General Hospital (offer motivational speeches)
Guest lectures for various faculty, Dental Hygiene Program

SPECIAL RECOGNITION

Elected into membership to Sigma Phi Alpha - Alpha Nu Chapter for outstanding contribution to dental hygiene education, 1984.

Nominated by my immediate peers and director as a candidate for the Ferris State University Distinguished Teacher Award for three years. Selected as one of five finalists, 1987.

First place award, Teaching Patient Centered Counseling, Educational Exhibits, American Association of Dental Schools, Annual Session, 1987.

Michigan Academy of General Dentistry, Award for the best contribution to the State Dental Meeting Table Clinic Awards, awarded to myself, and the other participants of the Dental Hygiene Program for our Table Clinics, 1987.

Certificate of Appreciation awarded for Table Clinic Presentation at the National Dental Association Annual Session, 1988.

Certificate of Appreciation awarded by the Michigan Dental Hygiene Association for a limited attendance seminar at the Educational/Scientific Annual Session, 1986.

Selected by American Dental Hygienists' Association as a facilitator for the National Conference on Ethics, Louisville, KY, June, 1992.

Selected by Program Director to serve as mentor to new faculty.

Outstanding Clinician Award, Third Place, Wisconsin Dental Association, Annual Session, Milwaukee, WI, 1993.

Outstanding Contribution Award for Significant Contribution to Annual Session, Virginia Dental Hygienists Association, Richmond, VA, 1993.

Nominated for F.S.U. Distinguished Alumnus, 1994

Nominated for A.D.H.A. Outstanding Dental Hygienist Award, 1994

Certificate of Appreciation awarded by International Congress of Oral Implantologists for Speaking at the 10th Annual Symposium for Auxiliaries and Practice Managers, - August, 1994

APPOINTMENTS

Board of Directors - Auxiliary Association of Dental Implantologists and Practice Managers, February, 1994.

National Speakers Association, 1995.

ADVISORY BOARD MEMBERSHIP

Young Dental Company, Advise regarding new dental products

Dental Video, Inc., Advise regarding curriculum for videotape on Oral Health for the Developmentally Disabled

Continuing Education Task Force - College of Allied Health Sciences

**Faye E. Moody,
Associate Professor
18670 Grass Lake Road
Big Rapids, MI 49307**

EXPERIENCE

1976 to present	Teaching, FSU, Dental Hygiene Program, Big Rapids, MI
Summer 1997-present	Private practice, Tom Rea, DDS, Traverse City, MI
1991-1993	Acting Program Director, Dental Hygiene Program, FSU
1990-91	Faculty Practice, FSU Dental Hygiene Clinic, Big Rapids, MI
1984-85	Private practice, Larry Jensen, DDS, Baldwin, MI
Summer 1977-81	Summer Registration Advisor, CAHS, Big Rapids, MI
1977-78	Acting Program Director, Dental Hygiene Program, FSU
1973-1775	Department Head, Public Health Dental Hygienist Las Animas-Huerfano County Health Department Trinidad, CO
1974-75	Visiting Instructor, Trinidad State Junior College, Nursing Program
1974-75	HEW Dental Health Consultant for Region VIII, Headstart Programs
1973-75	Private practice, Texas and Colorado

EDUCATION

1992	University of California, Dental School, LA Certification in Administration of Local Anesthesia, Nitrox Oxide and Soft Tissue Curretage
1981-82	Work done toward Phd. In Education
1977	MA, Educational Administration, CMU
1976	BS, AHTE, FSU, Big Rapids
1973	AS, Dental Hygiene, UT Dental School, Houston, TX
1969-71	Undergraduate, University of Texas, Austin

FSU COMMITTEES (1987-present)

1993-present	Dental Dept. Unit Action Plan Committee
1995-present	DH Curriculum Committee
1993-97	Student Outcomes Assessment Committee
1990-present	Advisor, Composite Pictures
1981-present	Dental Dept. Tenure Committee
1996-97	Advisor, Second Year Dental Hygiene Class
1990-93	Chair, Curriculum Revision/Semester Conversion Committee
1990-93	Chair, Patient Recruitment Committee
1990-93	CAHS Promotions Committee
1991-93	Dental Hygiene Semester Transition, Expert and Organizer
1992-1994	CAHS Curriculum Committee
1992-94	CAHS Continuing Education Committee
1992-95	University Women's Task Force
1989-92	University Academic Honors Committee
1986-89	CAHS Promotions Committee

PROFESSIONAL AFFILIATIONS

1971-80, 1990-present	American Dental Hygiene Association
1971-75	Texas Dental Hygienists Association
1973-75	Colorado Dental Hygienists Association
1975-80, 1990-present	Michigan Dental Hygienists Association, Grand Rapids Component
1977-present	MEA and NEA
1976	Nominated to Omicron Delta Kappa by Dean Tom Cook

- 1969-present Alpha Lambda Delta, National Scholastic Honorship Society
- 1994-present Delta Kappa Gamma, International Outstanding Womens Educators Assoc.
- 1994-present DAN (Divers Alert Network)
- 1994-present IANTD International Association of Nitrox Divers

SEMINARS AND PROGRAM PRESENTATIONS (1996-present)

- 1997 Scuba Diving Splash Party at the Ferris Pool
- 1996 Underwater Photography
 Beginning Scuba Diving (Course work)
 Eating Disorders
 Amalgam Polishing
 Application of Pit and Fissure Sealants

CONTINUING EDUCATION (1993-present)

- 1997 Gangs (2 hrs.)
 Underwater Video Photography II (6 days)
 Professional Women's Development Conference (1 ½ days)
 Underwater Rebreather Certification (8 hr.)
- 1996 The Powers of Estrogen (the effects of diet on) (6 hr.)
 DKG State Leadership Conference (2 days)
 Self-Esteem, Health and Nutrition (6 hrs.)
 Professional Women's Development Conference (11/2 days)
 Advertising, Body Image, and Women's Self Esteem (2 hr.)
- 1995 Coaching and Teambuilding Skills for Managers and Supervisors (6 hr.)
 Professional Womens' Development Conference (1 ½ days)
- 1994 Professional Women's' Development Conference (1 ½ days)
 Lifestyles and Parenting in the '90's (1 hr)
 Mind and Body Connection (1 hr.)
 Sharks, Tigers and Alligators (1 hr)
 Advanced Ultrasonic Instrumentation (lecture/lab, 2 days)
 Nutrition Instructors Workshop for Dental Hygienists (2 days)
 Assessment Conference IV: Implementing the Assessment Plan (6 hr.)
 Equipment Repair Workshop (4 hr.)
 Teaching Thinking Across the Curriculum (6 hr.)
 NAUI NITROX Certification (3 day)
 DAN Oxygen Administration Certification (2 day)
 NAUI Rescue Diver Certification (24 hr.)

- 1993 Professional Women's' Development Conference (1 day)
- Treating the Periodontally Involved Patient (1 day)
- Run With Your Dreams (1 hr)
- Healthy, Wealthy, and Wise (1 hr)
- DACUM Dental Hygiene Curriculum Development (2 day)

VOLUNTEER EXPERIENCE (1987-present)

- 1986-Present Parent helper in pre-school through middle school
- 1988-Present Assistant Scout Master, Cub Scouts and Boy Scouts of America
- 1988-1994 Red Cross Volunteer (Mass Services Coordinator, Disaster Action Team Captain, Damage Assessment, Etc.)
- 1988-1993 Sunday School teacher and Church Commission Member
- 1986-90 Big Rapids Coop Preschool Volunteer (treasurer, etc.)

HONORS

- 1996 Recognition for 20 years of service at FSU
- 1995 Honored by Delta Kappa Gamma as an outstanding Woman Educator
- 1985 Nominated for MAGB Distinguished Faculty Award
- 1985 Recognition by FSU Board for contributions to the University in redefining Ferris' mission and role
- 1984 Recognition by FSU Board for contributions to the University in long range planning
- 1979 Recognition by MDA for preparing Certified Dental Assistants for taking of the Registered Dental Assistant board
- 1977 Graduated from Masters Program at Central Michigan Univ. with 4.0 GPA
- 1976 Academic Honors Recipient, FSU
- 1976 Nominated to Omicron Delta Kappa Leadership Fraternity
- 1975-76 Dean's List each quarter (undergraduate work FSU)
- 1969-Present Member of Alpha Lambda Delta Scholastic Fraternity

Revised: 9/97

JANICE ANN PETERS, R.D.H.
11732 - 210th Avenue
Big Rapids, Michigan 49307
Phone: (616) 592-3339

CLINICAL EXPERIENCE:

- Jan. 1995 - Present** **Clinical Dental Hygienist**
Ferris State University, Big Rapids, Michigan
Practicing Dental Hygienist specializing in periodontal scaling/
root planing and tissue management. Instruct and demon-
strate clinical practices to FSU dental hygiene students both
first and second year.
- March 1995 - Present** **Dental Hygienist**
John F. Miller, III, DDS, Muskegon, Michigan
Practicing Dental Hygienist including radiography and duplica-
tions, scaling and root planing and tissue management, patient
education and treatment planning, sealants and fluoride treat-
ment. Assist in patient recall and scheduling.
- May 1995 - Present** **Dental Hygienist**
Robert Mixer, DDS, Muskegon, Michigan
Practicing Dental Hygienist including radiography and duplica-
tions, scaling and root planing and tissue management, patient
education and treatment planning, sealants and fluoride treat-
ment.
- June 1997 - Present** **Dental Hygienist**
Desiree Strayer, DDS, Comstock Park, Michigan
Practicing Dental Hygienist including radiography and duplica-
tion, scaling and root planing and tissue management, patient
education and treatment planning, sealants and fluoride treat-
ment.
- July 1987 - Present** **Dental Hygienist**
Robert Rosebery/John Lange, DDS
Sparta, Michigan
Practicing Dental Hygienist including Panorex Radiography and
radiographic duplications, patient education, patient treatment
planning, assist with patient scheduling and recall.
- May 1995 - July 1995** **Dental Hygienist**
John Garlic, DDS, Big Rapids, Michigan
Practicing Dental Hygienist included radiographs, patient edu-
cation, scaling/root planing and soft tissue management, treat-
ment planning, and fluoride treatment.

CLINICAL EXPERIENCE: (con't)

Feb. 1990 - Jan. 1995

Richard A. Nezwek, DDS, MS PC
Grand Rapids, Michigan

Practiced Dental Hygienist specializing in periodontal scaling/ root planing and tissue management. Responsibilities included regular recall appointments, dressing removal, TMJ radiography and radiography film processing, impressions and waxbites for bite splints. Assisted in surgical procedures including frenotomy, osseosectant surgery, bone and gingival grafts. New patient periodontal exams, fluoride treatments, occlusal bite adjustments. Patient education, treatment planning. Assist in the delivery of occlusal bite and snore guards. Assisted in the supervising of nitrous oxide and administration of anesthesia. Administered periodontal dental antibiotic and sulcus irrigation. Administered periodontal fiber. Constructed occlusal palatal surgery guards. Performed instrument maintenance and sterilization, pack surgery kits, administered patient oral hygiene instruction post surgery, and assisted with soft tissue management lectures. Responsible for creating and updating office procedures and policies, OSHA/MIOSHA policies and updates.

Sept. 1987 - Feb. 1990

Dental Hygienist/Assistant

Randy J. Breen, D.D.S.
East Grand Rapids, Michigan

Responsibilities included dental hygiene, patient education, radiography films, patient treatment planning, sealant application, taking impressions, pouring models and placing temporary restorations. Assisted in surgical procedures, extractions, electrosurge, filling and crown restoration. Maintained supply inventory and insured compliance to OSHA/MIOSHA regulations. Front office duties included patient scheduling, reception, filing and patient recall.

EDUCATION:

Sept. 1970 - May 1973

Ferris State University, Big Rapids, Michigan
Applied Arts Major
Degree: None

May 1987

Grand Rapids Community College, Grand Rapids, Michigan
Associate Degree-Dental Hygiene
GPA: 3.2

June 1995 - Present

Ferris State University, Big Rapids, Michigan
Currently pursuing Bachelor of Science Degree in Education
GPA: 3.32

CLINICAL EXPERIENCE: (con't)

Feb. 1990 - Jan. 1995

**Richard A. Nezwek, DDS, MS PC
Grand Rapids, Michigan**
Practiced Dental Hygienist specializing in periodontal scaling/ root planing and tissue management. Responsibilities included regular recall appointments, dressing removal, TMJ radiography and radiography film processing, impressions and waxbites for bite splints. Assisted in surgical procedures including frenotomy, osseosectant surgery, bone and gingival grafts. New patient periodontal exams, fluoride treatments, occlusal bite adjustments. Patient education, treatment planning. Assist in the delivery of occlusal bite and snore guards. Assisted in the supervising of nitrous oxide and administration of anesthesia. Administered periodontal dental antibiotic and sulcus irrigation. Administered periodontal fiber. Constructed occlusal palatal surgery guards. Performed instrument maintenance and sterilization, pack surgery kits, administered patient oral hygiene instruction post surgery, and assisted with soft tissue management lectures. Responsible for creating and updating office procedures and policies, OSHA/MIOSHA policies and updates.

Sept. 1987 - Feb. 1990

**Dental Hygienist/Assistant
Randy J. Breen, D.D.S.
East Grand Rapids, Michigan**
Responsibilities included dental hygiene, patient education, radiography films, patient treatment planning, sealant application, taking impressions, pouring models and placing temporary restorations. Assisted in surgical procedures, extractions, electrosurge, filling and crown restoration. Maintained supply inventory and insured compliance to OSHA/MIOSHA regulations. Front office duties included patient scheduling, reception, filing and patient recall.

EDUCATION:

Sept. 1970 - May 1973

**Ferris State University, Big Rapids, Michigan
Applied Arts Major
Degree: None**

May 1987

**Grand Rapids Community College, Grand Rapids, Michigan
Associate Degree-Dental Hygiene
GPA: 3.2**

June 1995 - Present

**Ferris State University, Big Rapids, Michigan
Bachelor of Science Degree in Education
GPA: 3.32**

SEMINARS AND PROGRAM PRESENTATIONS:

- | | |
|---------------------|--|
| May 1996 | Guest speaker at the Pinning Ceremony Dental Hygiene Program at Ferris State University. |
| Oct. 1996 - Present | Guest lecturer, TMD, Temporomandibular Disorder for the Dental Hygiene Program, Ferris State University. |

TRAINING AND CONTINUING EDUCATION:

"Team approach to Treating Dental Patients with Medical Problems", West Michigan Dental Society, April 1991

"Understanding the 1992 OSHA/MIOSHA Infection Control Regulations as They Apply to the Dentist", West Michigan Dental Society, April 1992.

"Anti-Infective Periodontal Therapy", West Michigan Dental Society, October 1992.

"Dental Implantology for the General Practitioner", West Michigan Dental Society, October 1993.

"An Aids Seminar", Kent Community Hospital, February 1994.

"Periodontal Therapy Into The 21" Century", presented by Proctor and Gamble, September 1995.

"Teledyne Seminar", presented by the Teledyne Water Pik Company, November 1995.

"How to Win Patients and Keep Them", presented by Dr. Hugh F. Doherty, Chicago Dental Mid-Winter Meeting, Chicago, Ill, February 1996.

"Coaching and Team Building Skills", presented by SkillPath Seminars, September, 1996.

"Drugs Patients Take", presented by Freida Pickett, RDH, MS, March, 1997.

Attended the Women's Conference, various seminars attended, April 17th and 18th, 1997.

VOLUNTEER EXPERIENCES:

- | | |
|----------------------|---|
| Sept. 1995 - Present | PHI DELTA ALPHA - Advisor
Ferris State University |
| Feb. 1997 - Present | Chairman of Children's Dental Health
Ferris State University |
- FSU Organizational Advisor to the Dental Students for the yearly Chicago Midwinter Dental Society Meeting

RESUME
JUDY A. SCHOETTLE

OFFICE ADDRESS

Ferris State University
College of Allied Health Sciences
VFS 313
200 Ferris Drive
Big Rapids, MI 49307
(616) 592-2282

HOME ADDRESS

212-A Lawrence Circle
Paris, Michigan 49338
(616) 796-5670

TEACHING EXPERIENCE:

Student Instructor: Department of Dental Hygiene
University of Kentucky
School of Dentistry
January 1974 - May 1974

Assistant Professor: Department of Dental Hygiene
University of Maryland
School of Dentistry
August 1974 - June 1976

Assistant Professor: Dental Hygiene Program
College of Allied Health Sciences
Ferris State University
September 1976 - present

DENTAL WORK EXPERIENCE:

Dental Assistant, United States Air Force, 3/63 to 7/66.
Dental Hygienist, Private Practice, 6/68 to 6/73.

EDUCATION:

University of Detroit Mercy, Detroit, Michigan
Certification as a Registered Dental Hygienist, 1968.

University of Detroit Mercy, Detroit, Michigan
Bachelor of Science in Dental Hygiene, 1970.

University of Kentucky, Lexington, Kentucky
Master of Science in Adult and Higher Education, 1974.

FERRIS STATE UNIVERSITY COMMITTEES:

Clinical Core Task Force Committee
Recruitment/Retention Committee
Promotions/Merit Committee
Library Committee
Health/Safety Committee
College of Allied Health Sciences Anniversary Committee
Tenure Committee
Space Committee
Parents Day Planning Committee
Arts and Lectures Committee

MEMBERSHIP IN PROFESSIONAL SOCIETIES:

American Dental Hygiene Association, membership at the national, state, and local levels from 1968 to the present.

Office Sterilization & Asepsis Procedures Research Foundation, membership from 1989 to the present.

American Association of Dental Schools, membership in 1989, 1990.

SEMINAR AND PROGRAM PRESENTATIONS:

Dental Hygiene Instruments, What's New...What's Old, presented at CAHS Periodontal Seminar, May 21, 1994.

Instrument Sharpening Table Clinic, CAHS Periodontal Seminar, May 21, 1994.

Instrumentation Sharpening Table Clinic, CAHS Periodontal Seminar, November 20, 1993.

Instrument Sharpening Table Clinic, CAHS Periodontal Seminar, May 21, 1993.

Application of Pit and Fissure Sealants (Clinical Instruction), FSC Dental Hygiene Continuing Education Presentation, September 22, 1984.

Polishing Amalgam Restorations (Clinical Instruction), FSC Dental Hygiene Continuing Education Presentation, September 22, 1984.

Instrument Sharpening, presented to the Howard County (Maryland) Dental Hygienists' Association, 1976.

CONTINUING EDUCATION:

Barkley Preventive Dentistry Program. Bob Barkley, D.D.S., University of Detroit School of Dentistry, 1971.

Nutrition in Preventive Dentistry. Abraham E. Nizel, D.D.S., M.S., University of Maryland School of Dentistry, 1974.

Teaching by Guided Discovery. Sharon Schwindt, R.D.H., B.S., University of Maryland School of Dentistry, Department of Dental Hygiene, 1974.

Nutritional Counseling. Carolyn Thompson, Nutritionist, Howard County Dental Hygienists' Association, 1975.

Dental Auxiliary Utilization. Robert E. Morris, D.D.S., University of Maryland School of Dentistry, Department of Dental Hygiene, 1975.

Review of Pharmacology. Harold L. Crossley, Ph.D., University of Maryland School of Dentistry, Department of Dental Hygiene, 1975.

Review of Oral Pathology. Martin Lunin, D.D.S., and Bernard Levy, D.D.S., University of Maryland School of Dentistry, Department of Dental Hygiene, 1975.

CONTINUING EDUCATION: (con't)

Organization of Lecture Material According to Statement P.I.E. (Proof, Information, Example). Charles B. Leonard, Jr., Ph.D., University of Maryland School of Dentistry, Department of Dental Hygiene, 1975.

Leadership Conference. Carl H. Hauber and Mary Jane Kolar, ADHA Staff Members, Maryland Dental Hygienists' Association, 1975.

Differential Diagnosis of Oral Lesions in Patient Examination. Richard M. Courtney, D.D.S., M.S., University of Michigan, 1977.

Dental Materials for Teachers of Auxiliaries. University of Michigan School of Dentistry Faculty, 1977.

Dental Materials. Gordon Christensen, D.D.S., Western Michigan Dental Society, 1977.

Transactional Analysis. Josephine Holt Grieve, M.A., District V, Dental Hygienists' Association, 1977.

Current Concepts in Prevention for the Child Patient. University of Detroit School of Dentistry Faculty, 1978.

Patient Examination and Evaluation. Ester Wilkins, R.D.H., D.M.D., Kalamazoo Valley Community College Dental Hygiene Program, 1978.

Training in Expanded Duties for Dental Auxiliaries. University of Kentucky School of Dentistry Faculty, 1978.

Root Planing and Soft Tissue Curretage. Debra D. Waggoner, R.D.H., B.S., Michigan Dental Hygienists' Association, 1978.

Medical Evaluation, Prevention and Treatment of Medical Emergencies. Martin J. Dunn, D.M.D., Michigan Dental Hygienists' Association, 1978.

Infection Control Practices in Our Office. Geza Terezhalmly, D.D.S., M.A., Grand Rapids Dental Hygienists' Society, 1992.

Legal Issues. Elissa Koopmans-Schwartz, R.D.H., M.S., J.D., Grand Rapids Dental Hygienists' Society, 1992.

Antimicrobial Periodontal Therapy. Cheri Pentzien, R.D.H., B.S., and Barry Mentzel, D.D.S., Consulting Concepts, 1992.

The Future is Geriatric Dentistry/Meeting the Challenge. Stephen J. Stefanac, D.D.S., University of Detroit Mercy, 1992.

Lasers in Dentistry: Review of Lasers in Dental Research, in Clinical Use, and Their Future Application. John A. Hess, D.D.S., University of Detroit Mercy, 1992.

New OSHA Regulations As They Relate to Dentistry. John A. Molinari, Ph.D., University of Detroit Mercy, 1992.

CONTINUING EDUCATION: (con't)

Putting Oral Pathology Into Your Practice. Richard M. Courtney, D.D.S., University of Detroit Mercy, 1992.

Advanced Ultrasonic Instrumentation in Periodontal Therapy. Kim Herrimans, R.D.H., M.S., FSU Dental Hygiene Program, 1993.

The Infectious Disease Process: Hepatitis, Tuberculosis, and AIDS. Peter G. Gulick, D.O., Michigan Dental Hygienists' Association, 1993.

Lumps and Bumps/Clinical and Diagnostic Approach. John Gobetti, D.D.S., Michigan Dental Association, 1994.

Medical Emergencies in the Dental Office. John Gobetti, D.D.S., Michigan Dental Association, 1994.

Evaluating Student Achievement/Writing Case Based Test Questions. John H. Kleffner, FSU Dental Hygiene Seminar, 1994.

A-dec Equipment Training Seminar. Presented by A-dec Company employees, 1994.

MIOSHA Training Seminar. Thomas McLellan, D.D.S., Connie Verhagen, D.D.S., and Michael Cerminaro, Michigan Dental Association, 1995.

Hormones, Diet, and Behavior. Laura Pawlak, Ph.D., R.D., INR, 1995.

Periodontal Therapy into the 21st Century: The Importance of Patient Specific Protocols. Proctor & Gamble, 1995.

Teledyne Product Overview. Ann Signer, R.D.H., Ferris State University, Dental Hygiene, 1995.

Soft Tissue Management/Non-Surgical Periodontal Therapy. S. N. Bhaskar, D.D.S., M.S., Ph.D., Clinical Dental Seminars, 1996.

USAF Dental Infection Control and Occupational Health Course. USAF Dental Investigation Service, Brooks AFB, Texas, 1996.

Drugs Patients Take - Implications for Dentistry. Frieda Atherton Pickett, R.D.H., B.S., M.S., Ferris State University Lifelong Learning, 1997.

HONORS:

Ferris State University Distinguished Teacher of the Year, 1995-96

Dean's List, University of Detroit Mercy, December 1969.

Dean's List, University of Detroit Mercy, May 1970.

Graduated cum laude, University of Detroit Mercy, 1970.

Sigma Phi Alpha, Dental Hygiene Honor Society, 1978 to present.

Nominated as a candidate for the Ferris State University Distinguished Teacher Award, 1979.

Nominated for Who's Who Among America's Teachers, 1994.

EVE J. SIDNEY
10652 N. Beech Avenue
Paris, MI 49338

ADMINISTRATIVE EXPERIENCE:

- 1995 - Present **Ferris State University**, Program Coordinator
Dental Hygiene Program, Big Rapids, Michigan
Responsibilities: Conduct faculty meetings, schedule
faculty assignments, assist Department Head and Clinical
Director with the dental hygiene programmatic issues,
curriculum development and revisions, advising pre-
dental hygiene and dental hygiene students, assist with
orientation of new faculty and staff, serving on depart-
ment, college, and university committees, and recruit-
ment.
- May 12 - July 1, 1997 **Grand Rapids Community College**, Facilitator during
the Grand Rapids Community College Dental Hygiene
students utilizing the Ferris State University dental
hygiene clinic, Ferris State University.

TEACHING EXPERIENCE:

- August 1993 - Present **Ferris State University**, Assistant Professor, Dental
Hygiene Program, Big Rapids, Michigan
Responsibilities: Clinical Coordinator for senior dental
hygiene students. Supervision and evaluation in didactic
and clinical laboratory courses. Supervision and orienta-
tion of clinical faculty. Coordination of National Board
Dental Hygiene and Northeast Regional Board Examina-
tion functions.
- April, 1995 Granted Tenure
- August 1994 - Present Instruction and curriculum development for FSUS 100.
This pilot course was developed to aid in retention of
freshman and pre-dental hygiene students.

TEACHING EXPERIENCE: (con't)

- Sept. 1990 - May 1993 **Ferris State University**, Assistant Professor, Dental Hygiene Program, Big Rapids, MI 49307
Responsibilities: Co-clinical coordinator for senior dental hygiene students, team supervision and evaluation in didactic and clinical dental hygiene courses. Supervision and orientation of clinical faculty. Coordination of National Board and Northeast Regional Examination functions.
- Organized Student of the American Dental Hygienists' Association (SADHA) Day for all dental hygiene programs in Michigan, 1991.
- Organized dental assisting and dental hygiene students to collaborate together during clinical exercises, video-taped students for peer/self evaluation while demonstrating clinical procedures.
- Authored Survey Manuals for the Self Analysis and Evaluation of the Dental Hygiene Program on-site visitation of the Commission on Accreditation of the American Dental Association in 1991. The Dental Hygiene program was granted "approval" by the Commission in May, 1992.
- March 1990 - May 1990 Dental Hygiene Faculty (temporary one quarter), Ferris State University, Big Rapids, MI 49307
Responsibilities: Co-clinical coordinator for senior dental hygiene students, team instruction, supervision, and evaluation in didactic and clinical dental hygiene courses.
- Sept. 1987 - March 1990 Teaching Assistant, Dental Hygiene Program, Big Rapids, MI 49307
Responsibilities: Clinical laboratory instruction, supervision, and evaluation in dental anatomy, and first and second year clinical dental hygiene courses.
- Nov. 1996 - May 1997 Substitute Clinical Instructor, Dental Hygiene, Big Rapids, MI 49307
Responsibilities: Supervision and evaluation in clinical laboratory dental hygiene courses.
- March - May, 1997
March - July, 1996 **Grand Rapids Community College**, Clinical Laboratory Instructor, Dental Hygiene Program, Grand Rapids, MI
Responsibilities: Instruction and evaluation in dental hygiene clinical lab.

TEACHING EXPERIENCE: (con't)

May 1997 - July 1997 Substitute Dental Hygienist in a variety of general and
June 1995 - August 1996 specialty offices.
May 1994 - August 1994
May 1993 - August 1993
May 1992 - August 1992
May 1991 - August 1991
May 1990 - August 1990
May 1989 - August 1989
May 1988 - August 1988

July 1984 - July 1987 **Dr. Tonino Iafano, D.D.S.**, Dental Hygienist, Greenville,
Michigan
Implementation of recall system, responsible for interview-
ing and hiring additional hygienists, maintain inventory for
dental hygiene supplies and equipment. Developed
periodontal program. Served as a resource contact for
surrounding dentists in geographic area.

1983 China/United States Educational Exchange. Presented
lectures to dentists and dental students at four major
universities throughout China during a three week
exchange.

EDUCATION:

Masters Degree, Occupational Education, 1992
Major: Instructor/Human Resource Development
Ferris State University
Big Rapids, MI 49307

Bachelor's Degree, Allied Health Education, 1986
Honors, High Distinction
Ferris State University
Big Rapids, MI 49307

Associate Degree, Applied Science Dental Hygiene, 1981
Honors
Kellogg Community College
Battle Creek, MI 49017

SEMINARS AND PROGRAM PRESENTATION:

Panoramic Radiography, Ferris State University Radiography students, July, 1996.

Panel Discussion, Student Retention, Ferris State University, August, 1995.

Let Your Ultrasonic Work For You, Grand Rapids Dental Hygienists Society, November, 1994.

Instrument Sharpening, Grand Rapids Dental Hygienists Society, November, 1993.

What's New in Dental Hygiene, Upper Peninsula Dental Hygiene Society, July, 1993. Ferris State University Summerfest, 1992. Mid-Michigan Dental Hygiene Society, May, 1994.

Magnetostrictive, Piezo, and Ultrasonics Techniques, Upper Peninsula Dental Hygiene Society, July, 1993. Mid-Michigan District Dental Hygiene Society, Mt. Pleasant, Michigan, May, 1994.

Dental Hygiene Instrumentation, Summerfest, June, 1992. Upper Peninsula Dental Hygiene Society, July, 1993.

Treating the Periodontally Involved Patient, Big Rapids, 1993-1994.

Advanced Ultrasonic Instrumentation in Periodontal Therapy, The Holbrook Technique, Laboratory Instruction, November, 1992, August, 1993.

The Use of Writing to Foster Faculty Student Learning, Poster Presentation, Association of Allied Health Professionals Annual Session, Orlando, Florida, November, 1992.

Oral hygiene care in-service training for registered nurses, certified nursing assistants and other support staff at nursing homes throughout southern Michigan, 1992-1994.

CONTINUING EDUCATION:

National Dental Hygiene Program Directors Meeting, June, 1997.

Product Update, Proctor and Gamble, October, 1995.

Nutrition for Dental Patients, Grand Rapids, MI, April, 1994.

Update on HIV/AIDS, Grand Rapids, MI, April, 1994.

Panda (Prevent Abuse and Neglect Through Dental Awareness), September, 1994.

Biofilm in Dental Unit Water Lines, Lansing, MI, October, 1994.

CONTINUING EDUCATION: (con't)

Dental Hygiene Update, Esther Wilkins, Holland, MI, October, 1994.

Oral Lesions and First Aid, Grand Rapids, MI, March, 1994.

Critical Thinking Workshop, 3 day workshop in Chicago, IL, 1993.

ADEC Technical Training, 5 day workshop, Portland, Oregon, August, 1992.

Soft Tissue Management Program, Grand Rapids, MI, September, 1992.

Pharmacology Update for the Dental Hygienist, Grand Rapids, MI, October, 1992.

Oral Manifestations of Eating Disorders, Compulsive Behavior, Grand Rapids, MI, September, 1992.

Instrument Sharpening, Grand Rapids, MI, April, 1992.

The Key to Good Teaching: Improving Your Lecture Skills, The Role of Periodontics in Comprehensive Patient Care, Writing Test Questions That Make a Difference, Systemic Medical Emergencies "Hands-on Workshop", Periodontics: March, 1992.

Root Planing II (didactic and clinical laboratory two day intensive course), University of Minnesota, January, 1992.

Progressive Teaching Methods, Women's Professional Development Conference, Big Rapids, MI, 1991.

ADDITIONAL CONTINUING EDUCATION:

Negotiating Skills/Assertiveness Training, Stress Management; Past, Present, and Future of Oral Facial Myology; Geriatric Dentistry; Soft Tissue Management; The Dental Hygienists Role in Treating Periodontal Patients; Dentistry and the Aging Patient; Documentation - Know What is Legal Forensic Dentistry; Herpes, Hepatitis and AIDS; Hazards in Dentistry; Bridging the Gap - Over the Counter Dental Products; Nutrition and the Dental Patient; Current Topics in Periodontics; Radiology Ins and Outs; Malpractice in Dentistry; Striving for Excellence - Stressors and Solutions; Temporomandibular Joint Updated; Prevention of Communicative Diseases; Sulcular Antibiotics; Myofunctional Therapy; Lasers in Dentistry.

FERRIS STATE UNIVERSITY COMMITTEES:

Curriculum Committee, College of Allied Health Sciences, 1994-present.
Radiography Search Committee Member, College of Allied Health Sciences, 1997.
Future Health Professionals Conference Committee, 1996.
Planning Committee, College of Allied Health Sciences, 1994-95.
Internal Communication Committee, Ferris State University, 1992-present.
Computer Committee, College of Allied Health Sciences, 1992-93.
Task Force Reorganization Committee, College of Allied Health Sciences, 1992.
Patient Recruitment Committee, Dental Hygiene, 1991.

PROFESSIONAL AFFILIATIONS:

Michigan Association of Dental Hygiene Educators, 1987-present.
Sigma Phi Alpha, 1989-present.
American Association of Dental Schools, 1992-present.
American Dental Hygienists' Association, 1984-present.
Michigan Dental Hygienists' Association, 1984-present.
Grand Rapids Dental Hygiene Society, 1984-present.
Ferris Professional Women, 1993-present.
Association of Schools of Allied Health Professionals, 1992-93.

VOLUNTEER EXPERIENCE:

Big Brothers/Big Sisters, Big Sister, 1994-present.
Sigma Phi Alpha, Alpha Nu Chapter, Secretary/Treasurer, 1992-present.
Michigan Association of Dental Hygiene Educators, Treasurer, 1991-present.
Student Faculty Liaison Chairman for the Michigan Dental Hygienists' Association, 1990-96.
Advisor of Student of the American Dental Hygienists' Society (SADHA), 1987-present.
Chairman for SADHA Day, 1991.
President, Grand Rapids Dental Hygiene Society, 1989.
Trustee, Michigan Dental Hygienists' Association, 1985-89.
Newsletter Editor, Grand Rapids Dental Hygiene Society, 1984-88.
Membership Service Council, Member at Large for the Michigan Dental Hygienists' Association, 1985-86, 1989-90.
Board Member at Large, Grand Rapids Dental Hygiene Society, 1991-92.

HONORS:

Promoted to Associate Professor, 1997.

Granted Tenure, 1995.

Nominated for the American Dental Hygienists' Association for Student Advisor of the Year, 1992, 1993.

Nominated for the American Dental Hygienists' Association for Student Advisor of the Year, received honorable mention, 1994.

HONORS: (con't)

Elected into Sigma Phi Alpha-Alpha Nu Chapter, Ferris State University as an honorary member, 1989.

Certificate of Appreciation, Michigan Dental Hygienists' Association, 1986-89.

1991-92 Recipient of American Dental Hygienists' Association Scholarship (\$1500), 1986.

MARILYN J. STOLBERG
418 Sanborn
Big Rapids, MI 49307
(616) 796-3288 (Home)
(616) 592-2272 (Business)

WORK EXPERIENCE

FERRIS STATE UNIVERSITY	1982-Present
Director of Clinical Education and Associate Professor Acting Program Director, Dental Assisting - 1989-90 Teaching Experience: General and Oral Pathology, Periodontics, Dental Pain Management for Dental Hygiene	
DENTAL PRACTICE ASSOCIATE	1996 - Present
John Garlick, D.D.S. 229 S. Warren, Big Rapids, MI	
ARTHUR ANDERSEN & CO.	1977-1978
HASTINGS PUBLIC SCHOOL	1974-1977
GALIEN PUBLIC SCHOOL	1974

EDUCATION

DOCTOR OF DENTAL SURGERY, 1982
Northwestern University Dental School

MASTER OF ARTS, 1973
Western Michigan University
Curriculum - Teaching in the Community College
Major - Biology

BACHELOR OF SCIENCE, 1970
Olivet College
Secondary Teaching Certificate

ASSOCIATES IN SCIENCE, 1968
Lake Michigan College

UNIVERSITY COMMITTEE PARTICIPATION

Ferris State University Committee participation

Sexual Harassment Awareness Committee	1992-93
Radiation Safety Committee	1992-Present
Athletic Blue Ribbon Task Force	1991
Search Committee, for Dean, College of Optometry	1990
Women's Professional Development Conference Comm.	1989-92
Women in Leadership Project Committee	1990
North Central Association of Colleges and Schools	
Research and Scholarly Activities Study Comm.	1987
Criteria III, Public Service Subcommittee	1992-93
Task Force for Communicable Diseases	1986-87, 1992-94, present
Search Committee, for Physician, University Student	
Health Center	1987
Student Health Advisory Committee	1985-88
Chairperson, 1986-88	
International Affairs Committee	1986-88

College of Allied Health Sciences Committee participation

Planning Committee	1994-95
Twenty-fifth Anniversary Celebration, Co-Chair	1992-94
Space Committee	1992-95
Reorganization Task Force	1991
Health and Safety Committee	1989-93
Co-Chair, 1989-91	
Promotion Committee	1983-86
Secretary, 1984-86	
Computer Committee	1988-89, 1995-Present
Ad Hoc-Infectious Disease and Medical Information Comm.	1988-89
Dental Programs Asepsis Committee	1986-93

PROFESSIONAL ASSOCIATIONS AND ACTIVITIES

Michigan License to practice Dentistry #13275	Since 1982
American Dental Association	1978 - Present
ADA Commission on Dental Accreditation	
and Council on Dental Education	
Consultant to Committee on Dental Assisting Education	1988-92
Accreditation Site Visit Representative	1988-94, 1996-Present
ADA Endowment and Assistance Fund, Inc. -	1997
Allied Dental Health Screening Committee	
Academy of General Dentistry	1984 - Present
Michigan Dental Association	1982 - Present
Committee on Dental Education	1984-91
Committee Chairperson	1987-90
West Michigan Dental Society	1982 - Present
Alternate Delegate MDA Annual Session	1991
Big Rapids Area Dental Study Club	1982 - Present
Secretary/Treasurer	1984-90
President	1993-95
Examiner, Registered Dental Assistant Licensing Examination	1992

PROFESSIONAL PRESENTATIONS

"Electronic Record Keeping of Dental Hygiene Student Clinic Performance", Michigan Dental Association Annual Meeting, April, 1997.

"Incorporation of Technology into Dental Hygiene Education", Poster Presentation, American Dental Association/World Dental Federation Annual Meeting, September 30, 1996.

"Application of Technology to Improve Management of Dental Hygiene Clinical Records", American Association of Dental Schools, Dental Hygiene Program Directors Annual Meeting, Phoenix, AZ, June 17, 1996, and American Dental Hygiene Association Annual Meeting, Phoenix, AZ, June 20, 1996.

"Adapting Commercial Software Using Bar Code Technology to Track Student Clinical Progress and to Manage Patient Records", American Society of Engineering Educators, April 1, 1996.

"Use of the Intraoral Camera in Dental Hygiene Education", American Dental Hygiene Association Annual Meeting, Chicago, IL, June, 1995.

"Career Mapping Workshop", Ferris Professional Women, April 1, 1990.

"Oral Pathology", Department of Corrections Dental Training Conference, 1988.

Symposium on the Dental Auxiliaries, Ferris State University, Organizational Committee and panel moderator, 1988.

"Hepatitis B and the Health Care Professional" Seminar presented annually to students in the College of Allied Health Sciences and College of Pharmacy. Responsible for organizing seminar and presenting topic. Since 1983.

"Math + Science = Choices", activity for junior high school girls. Speaker and panel member, 1987, 1989, 1991.

"Use of Video Taping in Teaching Dental Assisting", Educational Exhibit, American Association of Dental Schools annual session, 1987.

"AIDS in the Workplace" presentation to students in School of Allied Health, 1986.

"Computerized Recall System", exhibit, Summerfest, 1986.

"Hazards of Smokeless Tobacco", Lunch Break television interview program with Donna Smith, WWTV, Cadillac, Michigan, 1985.

"Sterilization and Disinfection", Grand Rapids Dental Assistants Society, 1985.

"Computer Applications in Dental Education", Educational Exhibit, American Association of Dental Schools annual session, 1985.

"Application of Pit and Fissure Sealants and Polishing Amalgam Restorations", clinical instructor, Dental Hygiene continuing education program, 1984.

PROFESSIONAL PRESENTATIONS (con't)

"Asepsis Review", day long in-service for dental programs faculty, 1984.

"Manpower in Dentistry", guest lecturer, Northwestern University Dental School, 1983.

"Reducing the Risk of Infection in the Dental Office", Ferris State College Vocational-Technical Education Conference, 1983.

"Herpes I and Herpes II", Four Seasons Dental Assistants Society, 1982.

PUBLICATIONS

Regular contributor to the Bulletin, West Michigan Dental Society, since 1991.

Dental Laboratory Technology at Ferris State University, West Michigan Dental Society Bulletin, September, 1990.

"Michigan's Dental Auxiliaries Shortage", Journal of the Michigan Dental Association, April/May, 1989.

"Where Will Tomorrow's Dental Auxiliaries be Found?" Detroit Dental Journal, July, 1988. Reprinted in the American Dental Association's SelectNet Newsletter, November, 1988. Reprinted in the Santa Barbara Dental Journal, Summer, 1989.

"Ferris Program Trains and Treats", Journal of the Michigan Dental Association, April/May, 1983.

PROFESSIONAL CONTINUING EDUCATION

In excess of 200 dental related continuing education units, majority recorded with the Academy of General Dentistry.

American Association of Dental Schools/John O. Butler Company, Faculty Legislative Workshop, Washington, D.C., June 24-27, 1991.

Bryn Mawr Summer Institute for Women in Higher Education Administration, Bryn Mawr, Pennsylvania, July, 1989.

Participation in Ferris State University's annual administrative retreat since 1985.

PROFESSIONAL CONTINUING EDUCATION (Dental)

Continuing
Education
Units

- 14 Incorporation of Technology into Your Practice, FSU Continuing Education, August 8 & 9, 1997.
- 8 Patient Management, Softdent Practice Management Systems, May 3 and June 5, 1997.
- 3 Risk Management Seminar - Module III, Physicians Insurance Company of America, May 1, 1997.
- 7 "Update on Pharmacology", Frieda Pickett, FSU Continuing Education, Grand Rapids, MI, March 22, 1997.
- 7 "Patient Communications", Robin Wright, West Michigan Dental Society, Grand Rapids, MI, March 14, 1997.
- 7 "Emergency Medicine in Dentistry", Stanley F. Malamed, Delta Dental Fund Seminar, Ann Arbor, MI, January, 1997.
- 2.5 "Incorporating Disease Risk Assessment Into Your Practice - Caries and Periodontal Disease", R. Genco, D.D.S. and I. Mandel, D.D.S., September 30, 1996.
- 2.5 "Successful Composite Techniques for Every Dentist - Anterior and Posterior", Paul Belvedere, D.D.S., September 30, 1996.
- 7 "Formulating the Dental Hygiene Diagnoses", JoAnn Gurenlian, Ph.D., RDH and "Client Informing and Motivating Skills", Linda Meeuwenberg, RDH, MA, Ferris State University, August 2, 1996.
- 5 "Infection Control and OSHA Essentials", Health Studies Institute, July 24, 1996.
- 8 "Viral Hepatitis", Health Studies Institute, July 22, 1996.
- 10 "HIV/AIDS: What Health Professionals Need to Know", Health Studies Institute, July 5, 1996.
- 2 "So You Want a New Computer System? What You Need to Know Before You Implement New Computer Resources, June 16, 1996.
- 1 DHNet: Resources for the Future, June 17, 1996.
- 2 Dental Hygiene and managed Care Trends, Challenges and Changes, American Association of Dental Schools Dental Hygiene Program Directors Annual Meeting, June, 1996.

PROFESSIONAL CONTINUING EDUCATION (Dental) (cont'd)

Continuing
Education
Units

- 4 "Tuberculosis Resurgent", Health Studies Institute, June 12, 1996.
- 6 "Advanced Instrumentation for Root Debridement", K. Wright and L. Meeuwenberg, Professional Development Association, May 17, 1996.
- 3 "Risk Management Seminar" - Module II, Physicians Insurance Company of America, May 1, 1996.
- 6 "A New Playing Field - How Technology is Revolutionizing Dental Practice", Chicago Dental Society, February 24, 1996.
- 6 Operative Dentistry, Delta Dental Seminar, University of Michigan, School of Dentistry, January 10, 1996.
- 5 "Periodontal Therapy into the 21st Century: The Importance of Patient Specific Protocols", Teleconference sponsored by Proctor & Gamble, September 9, 1995. Served as Grand Rapids site moderator.
- 4 Cardiopulmonary Resuscitation, Course C for the Health Care Provider, American Heart Association, September 9, 1996.
- 7 "The Present & Future of Dental Practice and Education", Dr. Arthur Dugoni, Grand Rapids, Michigan, September 4, 1995.
- 7 OSHA and Infection Control Update, Connie Verhagen, et. al., Michigan Dental Association, June 2, 1995.
- 7 "New Aspects in Dentistry", Dr. Gordon J. Christensen, Grand Rapids, MI, March 9, 1995.
- 6 "Pharmacotherapeutics", Delta Dental Seminar, University of Michigan, School of Dentistry, January 11, 1995.
- 1 Actisite Tetracycline Fibers, Big Rapids Area Dental Study Club, January 17, 1995.
- 1 Pediatric Dentistry, Connie Verhagen, Big Rapids Dental Study Club, November 15, 1994.
- 1 "Implants - Dentsply", Marty Lemiere, Big Rapids Area Dental Study Club, September 20, 1994.
- 7 "Soft Tissue Management/Non-Surgical Periodontal Therapy", S. N. Bhaskar, Grand Rapids, MI, July 30, 1994.

PROFESSIONAL CONTINUING EDUCATION (Dental) (cont'd)

**Continuing
Education
Units**

- 8 "Cancer, Oral & Cutaneous Signs of Malignancy", Health Studies Institute, July 14, 1994.
- 6 "Renaissance in Local Anesthesia", Stanley Malamed, D.D.S., University of Detroit-Mercy, June 22, 1994.
- 3 "3M - Electronic Anesthesia", Traverse City, MI, May 18, 1994.
- 1 "Troubleshooting Endodontic Failures", Scott Hodges, D.D.S., January 18, 1994.
- 6 "Guided Tissue Regeneration & If the Research Fits - Use It", University of Michigan, January 12, 1994.
- 1 "Hot Issues in Government Regulations Affecting Dentistry", Connie Verhagen, D.D.S., September 21, 1993.
- 3 "Risk Management Education", Physician's Insurance Company of Michigan, August 8, 1993.
- 6 "Practical Dental Materials for the General Practitioner", Eastern Dental Education Center, Department of Veterans Affairs, July 21, 1993.
- 8 Periodontics, Consulting Concepts, September 11, 1992.
- 6 "Prospering Through Professionalism", Jim & Naomi Rhode, May 15, 1992.
- 7 "Soft Tissue Management - Issues in Laser Dentistry", Traverse Dental Association, March 14, 1992.
- 1 "Antibiotic Prophylaxis - Amoxicillin vs. Penicillin", Big Rapids Dental Study Club, February 18, 1992.
- 7 "Mandibular Block Anesthesia", University of Detroit, May 15, 1991.
- 7 "OSHA Update", J. Molinari, et. al., University of Detroit, September 12, 1990.
- 3 "Current TMJ Treatments and Concepts", H.T. Perry, D.D.S., Upper Peninsula Dental Society Meeting, July 29, 1988.
- 6 "Patient with Special Needs", Michigan Academy of Dentistry for the Handicapped and University of Michigan School of Dentistry, June 18, 1988.
- 6 "What's New in Restorative Materials", Ralph Phillips, Delta Dental Fund, University of Michigan, School of Dentistry, January 13, 1988.

PROFESSIONAL CONTINUING EDUCATION (con't)

**Continuing
Education
Units**

- 3 "Adhesive Restorative Dentistry", Chicago Dental Society, February 23, 1988.
- 3 "Oral Medicine" Alan Drinnan, Chicago Dental Society, February 22, 1988.
- 3 "Periodontal Therapy for the General Dentist and Dental Hygienist. A New Look at Skills Used on a Daily Basis", Robert W. Parr, Chicago Dental Society, February 22, 1988.
- 4 "Fixed Prosthodontics", Michigan Dental Association, April 13, 1986.
- 6 "Dentistry for the Handicapped", Michigan Academy of Dentistry for the Handicapped and The University of Michigan School of Dentistry, September 10, 1986.
- 12 "National Conference on the Woman Dentist", American Dental Association, August 4-5, 1986.
- 14 "Symposium on Dentistry's Role and Responsibility in Mass Disaster Identification", American Dental Association and Northwestern University Dental School, June 23-24, 1986.
- 26 "Oral Pathology", Armed Forces Institute of Pathology, Washington, D.C., March 3-6, 1986.
- 3 "Periodontics", Michigan Dental Association, March 28, 1985.
- 3 "Dental Management of the Medically Compromised Patient", Sheldon M. Mintz, April 27, 1985.
- 33 "Forensic Dentistry", Armed Forces Institute of Pathology, Washington, D.C., October 15-19, 1984.
- 6 "Management of Life Threatening Emergencies in the Dental Office", L. George Upton, June 8, 1984.
- 18 "Periodontics Today - Perspectives of the Masters", The University of Michigan School of Dentistry, W. K. Kellogg Foundation Institute, May 17-19, 1984.
- 6 "Dental Treatment for the Adult and Aging Handicapped Patient", Michigan Academy of Dentistry for the Handicapped, May 23, 1984.
- 6 "Recent Advances in Patient Care", Esther M. Wilkins, D.D.S., Ferris State University, April 14, 1984.
- 8 "A Pharmacology Update", West Michigan Dental Society, March 22, 1984.

PROFESSIONAL CONTINUING EDUCATION (con't)

**Continuing
 Education
Units**

- 8 "Clinical Diagnosis and Treatment of Oral Lesions", George Bottomly, D.D.S., West Michigan Dental Society, March 21, 1984.
- 6 "Dental Care for the Mentally and/or Physically Disabled Persons", The University of Michigan School of Dentistry, June 22, 1983.
- 6 "Oral Cancer Symposium", American Cancer Society and Michigan Dental Association, May 18, 1983.

ACTIVITIES AND HONORS

- Dental Clinic Computerization Project 1995-Present
 Responsibilities include: selection and modification of dental practice software for patient management and student clinic performance record keeping, incorporation of bar codes, training staff, customized report writing.
- Mecosta-Osceola United Way Cabinet
 Ferris State University's Co-Chair 1993-1995
- Project Starburst Board of Directors 1996
- Omicron Delta Kappa Leadership Honor Society 1993-Present
- Women in Ferris Leadership Project: "Lifting As We Climb" 1989
 Summer Institute Scholarship
- St. Andrew's Episcopal Church
 Community Nursery School, Board of Directors 1984-87
 Episcopal Church Women, Board Member 1987-91, 1996
 Rector Search Committee 1989
 Lay Eucharistic Minister 1992-Present
 Building Renovation Committee 1996
- Child Safety Day, Organizational Committee 1986
- Children's Dental Health Month activities 1983-Present
- Bay Cliff Health Camp for Handicapped Children,
 Big Bay, Michigan, Volunteer dentist 1984
- Sigma Phi Alpha, Dental Hygiene Honorary 1985-Present