

Curriculum Committee



Change of Course Proposal

School or Division	School of Health Professions
Program or Certificate	Dental Hygiene
Proposed by (faculty only)	Carol Chapman, Clori Atkins, Magdaline Britto, Deb Lux and Karen Molumby
Presenter (faculty only)	Karen Molumby
Note that the presenter (faculty) listed above must be present at the Curriculum Committee meeting or the proposal will be returned to the School or Division and be resubmitted for a later date.	
Submission date	8/19/2020
Current course prefix, number, and title	DEH 1802 Dental Hygiene II
All Curriculum proposals require approval of the Curriculum Committee and the Provost. Final approval or denial of a proposal is reflected on the completed and signed proposal.	
<input type="checkbox"/> Approve <input type="checkbox"/> Do Not Approve	
_____ <i>Curriculum Committee Chair Signature</i> _____ <i>Date</i>	
<input type="checkbox"/> Approve <input type="checkbox"/> Do Not Approve	
_____ <i>Provost Signature</i> _____ <i>Date</i>	
All Curriculum proposals require review by the Office of Accountability & Effectiveness.	
<input type="checkbox"/> Reviewed	
_____ <i>Office of Accountability & Effectiveness Signature</i> _____ <i>Date</i>	

Section I, Important Dates and Endorsements Required

NOTE: Course and Program changes must be submitted by the dates listed on the published Curriculum Committee Calendar. Exceptions to the published submission deadlines must receive prior approval from the Provost' Office.

Term in which approved action will take place	Fall 2020	
Provide an explanation below for the requested exception to the effective date.		
Syllabus changes completed in Summer 2020 to align with Commission on Dental Accreditation standards, Florida curriculum frameworks, and Florida state statutes.		
Any exceptions to the term start date requires the signatures of the Academic Dean and Provost prior to submission to the Dropbox.		
Dean	Signature	Date
Dr. Paula Tropello		
Provost	Signature	Date
Dr. Eileen DeLuca		

Required Endorsements	Type in Name	Select Date
Department Chair or Program Coordinator/Director	Karen Molumby	8/19/2020
Academic Dean or Provost	Dr. Paula Tropello	8/19/2020
List all faculty endorsements below. (Note that proposals will be returned to the School or Division if faculty endorsements are not provided).		
Carol Chapman, Clori Atkins, Magdaline Britto, Deb Lux and Karen Molumby		

Section II, Proposed Changes

Change to course prefix and number Lecture/lab course combined must include "C" / lab course must include "L"	List new course prefix and number
Do any of the changes affect the AA focus? (If so, a Change of Program proposal is also needed.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Provide justification for the proposed prerequisite(s).	
Change to course title	NA
Does the Course Title Change affect other courses? (Ex: If Guitar I becomes Intro to Guitar, should Guitar II become Guitar I?)	
Change of School, Division, or Department	NA
Change to course prerequisite(s) and minimum grade(s) (must include minimum grade if higher than a "D")	From: To:
Change to course co-requisites	From: To:

Provide justification for the proposed co-requisite(s).	
Is any co-requisite for this course listed as a co-requisite on its paired course? (Ex. CHM 2032 is a co-requisite for CHM 2032L, and CHM 2032L is a co-requisite for CHM 2032)	Yes DEH 1802L Dental Hygiene II Clinical
Change to course credits or clock hours	From: To:
Change to contact hours (faculty load)	From: To:
Are the Contact hours different from the credit/lecture/lab hours?	
Change to grade mode	Choose an item.
Change to credit type	Choose an item.
Change to course description (provide below)	
Type in entire new course description here	

Change to general topic outline (type in entire new outline below)
<p>List changes to General Topic Outline:</p> <p>From:</p> <ul style="list-style-type: none"> • The Five Steps of the Dental Hygiene Process of Care • Health Promotion, Disease Prevention, and the Control of Dental Caries • Toothbrushes, Tooth brushing and Interdental Care • Dentifrices, Mouth rinses, and Oral Irrigation • Care of Dental Implants, Dental Prostheses or Orthodontic Appliances • Diet and Dietary Analysis • Anxiety, Pain Control and Dentin Hypersensitivity • Tobacco Use and Tobacco Cessation <u>Nicotine use</u> • Fluorides <p>To:</p> <ul style="list-style-type: none"> • The Steps of the Dental Hygiene Process of Care • Health Promotion, Disease Prevention, and the Control of Dental Caries • Toothbrushes, Tooth brushing and Interdental Care • Dentifrices, Mouth rinses, and Oral Irrigation

- Care of Dental Implants, Dental Prostheses or Orthodontic Appliances
- Diet and Dietary Analysis
- Anxiety, Pain Control and Dentin Hypersensitivity
- Nicotine use
- Fluorides

Change to Learning Outcomes: **For information purposes only.**

IV. Course Competencies, Learning Outcomes and Objectives

A. General Education Competencies and Course Outcomes

1. Integral *General Education Competency or competencies*:

2. Supplemental *General Education Competency or competencies*:

B. In accordance with Florida Statute 1007.25 concerning the state’s general education core course requirements, this course meets the general education competencies for

C. Other Course Objectives/Standards

Section III (must complete each item below)

Should any major restrictions be listed on this course? If so, select "change" and list the appropriate major restriction codes or select no change.	No change List applicable major restriction codes
Change course to an “International or Diversity Focus” course?	No, not International or Diversity Focus
Change course to a General Education course?	No
Change course from General Education to non-General Education?	No
Change course to a Writing Intensive course?	No
Change course from Writing Intensive to non-Writing intensive?	No
Change course to repeatable?	No

(A repeatable course may be taken more than one time for additional credits. For example, MUT 2641, a 3 credit hour course can be repeated 1 time and a student can earn a maximum of 6 credits). *Not the same as Multiple Attempts or Grade Forgiveness	If repeatable, list maximum number of credits
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Impact of Change of Course Proposal	
Will this change of course proposal impact other courses, programs, departments, or budgets?	No
If the answer to the question above is “yes”, list the impact on other courses, programs, or budgets?	List impacts here
Have you discussed this proposal with anyone (from other departments, programs, or institutions) regarding the impact? Were any agreements made? Provide detail information below.	
NA	

Will this change of course proposal impact library services or budgets?	No
If the answer to the question above is “yes”, list the impact on other courses, programs, or budgets?	List impacts here
Have you discussed this proposal with anyone (from other departments, programs, or institutions) regarding the impact? Were any agreements made? Provide detail information below.	
NO	

Section IV, Justification for proposal

Provide justification (below) for each change on this proposed curriculum action.
THE DENTAL HYGIENE PROGRAM CONDUCTS A FORMAL AND ONGOING REVIEW OF THE CURRICULUM TO ASSURE THE INCORPORATION OF NEW EMERGING INFORMATION AND TO ELIMINATE UNWARRANTED REPETITION TO ATTAIN STUDENT COMPETENCE. THE FACULTY REVIEWED THE CURRICULUM AND REVISED THE COURSE OUTCOMES TO BE CONGRUENT WITH THOSE STANDARDS AND LAWS AS OUTLINED BY THE COMMISSION ON DENTAL ACCREDITATION, THE FLORIDA CURRICULUM FRAMEWORKS AND THE FLORIDA STATE STATUTES.