

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 2806L Dental Hygiene IV Clinical
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")	
Change to course co-requisites	
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 2806 Dental Hygiene IV
Change to course credits or clock hours	
Change to contact hours (faculty load)	
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)	

Change to Learning Outcomes: For information purposes only.

<p>IV. Course Competencies, Learning Outcomes and Objectives</p> <p>A. General Education Competencies and Course Outcomes: Think</p> <p>1. Integral <i>General Education Competency or competencies:</i></p> <p>From (edits to existing language shown)</p> <ul style="list-style-type: none"> Interpret assessment data, design DHCP, implement appropriate treatment modalities and evaluate dental hygiene services, for <u>various</u> periodontal class types IV for to include the child, adolescent, adult, and geriatric <u>and</u> patients <u>with a special need</u> from diverse populations. <p>To: Interpret assessment data, design DHCP, implement appropriate treatment modalities and evaluate dental hygiene services, for various periodontal class types to include the child, adolescent, adult, geriatric, and patients with a special need from diverse populations.</p> <p>B. Other Course Objectives/Standards</p> <p>Edits shown:</p> <ol style="list-style-type: none"> Incorporate technology in the delivery of dental hygiene patient care services on the general, oral, periodontal, and psychosocial health status of the child, adolescent, adult, geriatric and special-needs populations using methods consistent with medico legal principles. Expose, interpret and mount diagnostic radiographs.

3. ~~Collaboratively d~~Design individualized dental hygiene care plans based on assessment data that sequences evidenced-based dental hygiene interventions which promotes and maintain good oral health.
4. Incorporate a variety of deposit removal techniques to achieve and maintain oral health.
5. Adhere to established rules and regulations outlined by the Florida State Statutes in the provision of dental hygiene care.
6. Document all aspects of all oral health services accurately and consistently to prevent medical errors.
7. Interpret outcomes and recommend appropriate maintenance or recare appointments.
8. Identify potential caries risk factors and incorporate a plan to implement treatment modalities that promote oral health and prevent disease.
9. Apply deposit removal techniques designed to achieve and maintain oral health.
10. Identify and administer local anesthetic safely and effectively on ~~for~~ clinical patients.
11. Communicate effectively with diverse ~~individuals~~ populations through oral conversation and written documentation.
12. Screen patients for preventative, educational and therapeutic dental services and refer patients who have physiological, psychological and/or social problems for comprehensive evaluation.
13. Perform comprehensive dental hygiene services for the child, adolescent, adult, and geriatric patients.
14. Identify and evaluate skills related to self-assessment and reflective dental hygiene practice.
15. Perform comprehensive dental hygiene services for the child, adolescent, adult, geriatric and patients with a special need.

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? (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	No If repeatable, list maximum number of credits

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.