



**Summer Semester 2017
Course Syllabus**

Course Title & Number: DHYG 2200 Periodontology
Credit Hours/Minutes: 3 Semester Credit Hours and 2250 minutes
Course Schedule: Mondays 10:00 - 12:20pm and 1:10-3:30pm, Room # 906, Health Science Annex
CRN: 60186

Course Director: Lori V. DeFore, RDH, BS, BTh
Office Hours: Mondays: 7:30am - 10:00am and 3:30pm - 5:30pm
Tuesdays: 1:00pm - 5:30pm
Wednesdays: 4:30pm - 5:30pm

Office Location: Room #909, Health Science Annex (HSA)
Email Address: ldefore@southeasterntech.edu
Phone: 912-538-3251
Fax Number: 912-538-3278

REQUIRED TEXT:

Foundations of Periodontics for the Dental Hygienist, Fourth Edition. Nield-Gehrig & Willmann. LWW. 2016.

REFERENCE TEXTS:

Dental Hygiene Theory and Practice, Fourth edition. Darby. El Sevier. 2014.

Case Studies in Dental Hygiene, Third edition. Thomson. Pearson. 2013.

REQUIRED EQUIPMENT/SUPPLIES: Notebook, pen and highlighter.

COURSE DESCRIPTION:

This course provides fundamental information on periodontal anatomy, pathogenesis of the periodontal diseases, and an introduction to modern rational periodontal therapy, including preventive, non-surgical, and surgical methods. Topics include: tissues of the periodontium, epidemiology of periodontal diseases, periodontal diseases, disease prevention and treatment planning, non-surgical periodontal disease therapy, drug therapy, immunology and host defense mechanism, microorganisms associated with periodontology, the principles of periodontal surgery, periodontal/endodontic emergencies, and implantology and maintenance of implants.

MAJOR COURSE COMPETENCIES (CC):

1. Tissues of the Periodontium
2. Periodontal Pathology
3. Periodontal Diseases
4. Assessment and Treatment Planning
5. Periodontal Disease Therapy
6. Periodontal Emergencies

PREREQUISITES: DHYG 1010

COREQUISITES: NONE

GENERAL CORE COMPETENCIES (GC):

- a. The ability to utilize standard written English.
- b. The ability to solve practical mathematical problems.
- c. The ability to read, analyze, and interpret information.

STUDENT REQUIREMENTS:

Students are responsible for policies and procedures in the STC Catalog. Students are expected to exhibit professional behavior at all times. Each student must show respect and concern for fellow students and for the course director. Insubordination will not be tolerated, and disciplinary measures will be enacted.

There are many reading assignments in this class. The student must read nightly in the texts to be prepared for class.

Students are required to obtain any student study materials from the course Materials Drive:

M/Dental Hygiene/DHYG 2200. It is the student's responsibility to print any materials available to be used prior to scheduled class time.

Students are advised to check their e-mails regularly for any additional information that is related to the class or the Dental Hygiene Program.

******Prior to the discussion of each chapter in class, the student is expected to complete the following:**

- 1. Read the assigned chapter/chapters; answer/complete all case study exercises in the chapter review section; prepare to participate in the critical thinking activities; and complete all homework assignments.**
- 2. Know the answers to the learning objectives of the assigned chapter/chapters.**
- 3. Know the definitions of the key terms listed at the beginning of the assigned chapter/chapters.**
- 4. Go to the M Drive and print off or view applicable documents under the DHYG 2200 folder.**

ATTENDANCE GUIDELINES: Class attendance is a very important aspect of a student's success. Being absent from class prevents students from receiving the full benefit of a course and also interrupts the learning process. Southeastern Technical College considers both tardiness and leaving early as types of absenteeism. Responsibility for class attendance rests with the student. Regular and punctual attendance at all scheduled classes is required for student success. Students will be expected to complete all work required by the instructor as described in the individual course syllabus.

Instructors have the right to give unannounced quizzes/assignments. Students who miss an unannounced quiz or assignment will receive a grade of 0. Students who stop attending class, but do not formally withdraw, may receive a grade of F and face financial aid repercussions in upcoming semesters.

Instructors are responsible for determining whether missed work may be made up and the content and dates for makeup work is at the discretion of the instructor.

Students will not be withdrawn by an instructor for attendance; however, all instructors will keep records of graded assignments and student participation in course activities. The completion dates of these activities will be used to determine a student's last date of attendance in the event a student withdraws, stops attending, or receives an F in a course.

ADDITIONAL ATTENDANCE PROVISIONS:

Health Sciences

Attendance is counted from the first scheduled class meeting of each semester. To receive credit for a course a student must attend at least 90% of the scheduled instructional time. Time and/or work missed due to tardiness or absences must be made up at the convenience of the instructor. Any student attending less than the required scheduled instructional time (90%) may be dropped from the course as stated below in the Withdrawal Procedure.

Tardy means arriving after the scheduled time for instruction to begin. Early departure means leaving before the end of the scheduled time. Three (3) tardies or early departures equal one (1) absence for the course.

Requirements for instructional hours within Health Science programs reflect the rules of respective Licensure Boards. Therefore, class and clinical attendance is mandatory. No unexcused absences are allowed and all time must be made up. Make-up time will be under the supervision of and date assigned by the instructor. Policies and procedures regarding make-up time for these programs are outlined in the respective program handbooks.

For this class which meets one session per week for 9 weeks, the maximum number of sessions a student may miss is one session.

SPECIAL NEEDS: Students with disabilities who believe that they may need accommodations in this class based on the impact of a disability are encouraged to contact Helen Thomas, 912-538-3126, hthomas@southeasterntech.edu, to coordinate reasonable accommodations.

SPECIFIC ABSENCES: Provisions for Instructional Time missed because of documented absences due to jury duty, military duty, court duty, or required job training will be made at the discretion of the instructor.

PREGNANCY: Southeastern Technical College does not discriminate on the basis of pregnancy. However, we can offer accommodations to students who are pregnant that need special consideration to successfully complete the course. If you think you will need accommodations due to pregnancy, please advise me and make appropriate arrangements with Helen Thomas, (912) 538-3126, hthomas@southeasterntech.edu.

WITHDRAWAL PROCEDURE: Students wishing to officially withdraw from a course(s) or all courses after the drop/add period and prior to the 65% portion of the semester (date will be posted on the school calendar) must speak with a Career Counselor in Student Affairs and complete a Student Withdrawal Form. A grade of "W" is assigned when the student completes the withdrawal form from the course.

Students who are dropped from courses due to attendance (see your course syllabus for attendance policy) after drop/add until the 65% point of the semester will receive a "W" for the course. Abandoning a course(s) instead of following official withdrawal procedures may result in a grade of 'F' being assigned.

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After the 65% portion of the semester, the student will receive a grade for the course. (Please note: A zero will be given for all missed assignments.)

There is no refund for partial reduction of hours. Withdrawals may affect students' eligibility for financial aid for the current semester and in the future, so a student must also speak with a representative of the Financial Aid Office to determine any financial penalties that may be assessed due to the withdrawal. All grades, including grades of 'W', will count in attempted hour calculations for the purpose of Financial Aid.

Remember - Informing your instructor that you will not return to his/her course does not satisfy the approved withdrawal procedure outlined above.

MAKEUP GUIDELINES (Exams, quizzes, homework, projects, etc...):

No unexcused absences are allowed and all missed class time must be made up. Make-up time will be under the supervision of and date assigned by the instructor. Policies and procedures regarding make-up time for these programs are outlined in the respective program handbooks and this syllabus.

ACADEMIC DISHONESTY POLICY: The STC Academic Dishonesty Policy states *All forms of academic dishonesty, including but not limited to cheating on tests, plagiarism, collusion, and falsification of information, will call for discipline.* The policy can also be found in the *STC Catalog and Student Handbook*.

Procedure for Academic Misconduct

The procedure for dealing with academic misconduct and dishonesty is as follows:

--First Offense--

Student will be assigned a grade of "0" for the test or assignment. Instructor keeps a record in course/program files and notes as first offense. The instructor will notify the student's program advisor, academic dean, and the Registrar at the student's home campus. The Registrar will input the incident into Banner for tracking purposes.

--Second Offense--

Student is given a grade of "WF" for the course in which offense occurs. The instructor will notify the student's program advisor, academic dean, and the Registrar at the student's home campus indicating a "WF" has been issued as a result of second offense. The Registrar will input the incident into Banner for tracking purposes.

--Third Offense--

Student is given a grade of "WF" for the course in which the offense occurs. The instructor will notify the student's program advisor, academic dean, and the Registrar at the student's home campus indicating a "WF" has been issued as a result of second offense. The Vice President for Student Affairs, or designee, will notify the student of suspension from college for a specified period of time. The Registrar will input the incident into Banner for tracking purposes.

STATEMENT OF NON-DISCRIMINATION: Southeastern Technical College does not discriminate on the basis of race, color, creed, national or ethnic origin, gender, religion, disability, age, disabled veteran, veteran of Vietnam Era or citizenship status, (except in those special circumstances permitted or mandated by law). This school is in compliance with Title VI of the Civil Rights Act of 1964, which prohibits discrimination on the basis of race, color, or national origin; with the provisions of Title IX of the Educational Amendments of 1972, which prohibits discrimination on the basis of gender; with the provisions of Section 504 of the Rehabilitation Act of 1973, which prohibits discrimination on the basis of handicap; and with the American with Disabilities Act (ADA).

The following individuals have been designated to handle inquiries regarding the nondiscrimination policies:

ADA/Section 504 - Equity- Title IX (Students) - OCR Compliance Officer	Title VI - Title IX (Employees) - EEOC Officer
Helen Thomas, Special Needs Specialist Vidalia Campus 3001 East 1 st Street, Vidalia Office 108 Phone: 912-538-3126 hthomas@southeasterntech.edu	Blythe Wilcox, Director of Human Resources Vidalia Campus 3001 East 1 st Street, Vidalia Office 138B Phone: 912-538-3147 bwilcox@southeasterntech.edu

GRIEVANCE PROCEDURES: Grievance procedures can be found in the Catalog and Handbook located on STC's website.

ACCESS TO TECHNOLOGY: Students can now access Blackboard, Remote Lab Access, Student Email, Library Databases (Galileo), and BannerWeb via the mySTC portal or by clicking the Current Students link on the STC website at www.southeasterntech.edu.

TCSG GUARANTEE/WARRANTY STATEMENT: *The Technical College System of Georgia guarantees employers that graduates of State Technical Colleges shall possess skills and knowledge as prescribed by State Curriculum Standards. Should any graduate employee within two years of graduation be deemed lacking in said skills, that student shall be retrained in any State Technical College at no charge for instructional costs to either the student or the employer.*

EVALUATION PROCEDURES:

During an examination, students are required to place all textbooks and personal property on the counter located in the back of the classroom. Students are to rotate seats prior to testing and to be seated with an empty seat between each student. Computer monitors should be facing the front of the classroom during the exam. No talking is allowed once the exam begins. Students found with their cell phone or any other personal communication device during the exam will be considered cheating and given a zero for the exam. Once a student completes his/her exam, he/she will turn the exam paper over and remain at his/her desk quietly until everyone has finished with the exam. This will prevent other students from being distracted as students exit. Then, the proctor will take up all exam papers and class will begin. Once the exam begins, tardy students may not enter the classroom. The time limit for an exam is one hour. At the 50 minute mark, the proctor will announce to the students that they have 10 minutes left to complete the exam. Failure to complete assignments will result in one point being deducted from the final course grade for each assignment not completed by the deadline specified.

Students must be on time for all exams/evaluations. Failure to be in assigned seat/operator at the start time of the class will result in inability to take the test and a zero will be assigned. All students must remain seated quietly until all classmates have completed their exam or the time limit has expired. Exams will then be gathered and lecture will begin.

Students may make up one exam, with the **exception of the final exam.** A grade of Zero will be assigned for any missed final exam. A make-up exam in a different format will be given if a makeup exam is warranted.

All projects and assignment deadlines will be strictly enforced. **Failure to submit the power point project on the due date will result in a grade of zero. The project will still need to be completed and turned in for evaluation by the instructor. Each assignment must be completed in its entirety and submitted in the**

specified timeframe. Failure to do so will result in a one point deduction from the final course grade. No exceptions!! Late or incomplete assignments will still need to be completed and turned in for instructor review and feedback. If you are going to be absent, you should deliver your assignment to your instructor prior to the deadline to ensure credit.

GRADING POLICY:

Students will be given a total of 4 examinations. The four examinations include 3 examinations throughout the semester and 1 comprehensive final examination at the end of the semester. Students will be allowed to make-up **one** examination, **excluding the final examination**, due to an excused absence approved by the course director. The student will be penalized for missing the exam, and 10 points will be deducted from the make-up examination grade. If the student misses more than one examination, a grade of zero will be assigned for the examination.

After an exam, or quiz if applicable to the course, has begun, no questions or talking is allowed.

GRADING POLICY:

EXAMS 1-4:

Exam #1: Chapters 1-10

Exam #2: Chapters 11-20, chapter 21 is not covered in this class.

Exam #3: Chapters 22-32, omitting Chapters 21, 23 and 29 not covered in this class.

Exam #4: Comprehensive Final covering all material taught in this class.

The *exams* 1-3 grades will be averaged. They will account for 60% of the final course grade. A comprehensive final examination will be given at the end of the semester. **No make-up exam will be allowed for the final examination.** **Failure to take the final examination on the specified date will result in a grade of zero on the final exam.** The *final exam* will include all material covered during the semester. A total of 100 points may be earned on the final examination. The *final exam* will account for 25% of the final course grade. A *group project/presentation* involving a periodontal surgery topic will be assigned and will account for 10% of the final course grade. The Arestin Skill Evaluation will be averaged at 5% of the final course grade. The instructor will verify that all homework assignments are completed as well as give feedback. **Each assignment that is not completed in its entirety and submitted in the specified timeframe will result in a one point deduction from the final course grade.**

Group Project/Power Point Presentation:

Two to three students will work together to create a *Power Point Presentation* on the following assigned topics:

(1)Periodontal Flap and Osseous Resective (Pocket Reduction) Surgery

(2)Bone Graft with Guided Tissue Regeneration

(3)Soft Tissue Graft

(4)Dental Implant Fixture Placement

The topic will be researched and information collected concerning the procedure. An informative **summary sheet** of the procedure must be provided to the class by the students at the time of the presentation. The summary should include their topic name, how it is performed, when it is recommended and post operative outcomes of such a procedure and any other relevant information. Maintain a professional delivery for both the Power Point design and the information summary. The **presentation should be 10 minutes in length maximum** and explain the topic assigned. Each student will be evaluated on participation and involvement in the project. See **Appendix A** for the self-assessment checklist and **Appendix B** for the power point project grading rubric. Project Due June 26, 2017 in the am session.

ARESTIN SKILL EVALUATION:

During this course, the student will demonstrate the accurate application of a locally administered antimicrobial, Minocycline Microspheres – Arestin. The skill will be performed on the tyodont with an Arestin demonstration applicator. ****Bottom Line= If you do not achieve a grade of 100 on the first attempt or a grade of 70 on the second/final attempt of this Arestin skill evaluation, you will receive an “F” in this course regardless of your final numerical course grade. You will not be allowed to progress in the course. If you receive an “F” in any DHYG course, you will not be able to progress in the dental hygiene program.** Please see Appendix C for the skill evaluation sheet for this procedure.

Grading Components

Exam 1-3(averaged together)	60%
Exam 4 (comprehensive final)	25%
Arestin Skill Evaluation	5%
Group Project/PPT Presentation	10%
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Total	100%

Each student’s final course grade will be determined as follows:

Exams 1-3 (averaged together)	X 0.60	=	+ _____
Exam 4 (comprehensive)	X 0.25	=	+ _____
1 Arestin Skill Evaluation	X 0.05	=	+ _____
Group Project/PPT Presentation	X 0.10	=	+ _____
Numerical Course Grade		=	_____
Point Deductions for Incomplete/Late Assignments		=	- _____
Final Course Grade			_____

Grades will be assigned by the following grading scale:

- A= 90-100 Excellent
- B= 80-89 Good
- C= 70-79 Satisfactory
- D= 60-69 Poor
- F= below 60 Failing

LIBRARY RESOURCES

The address of the Southeastern Technical College Library Website is listed below: <http://www.southeasterntech.edu/library/Resources.asp>. This link will provide additional information on citations using APA format. The link will also provide access to Galileo, Online Catalog, Net Library on campus, Net Library off campus, periodicals, and newspapers. In addition, you may seek additional assistance in person by visiting the librarian in the Medical Technology Building or the librarian in the main building.

WEBSITES FOR SELF-ASSESSMENT AND APPLICATION OF CRITICAL THINKING SKILLS:

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| www.perio.org | www.dentalcare.com | www.amyrdh.com |
| www.myarestin.com | www.perioeducation.com | www.quizlet.com |



Dental Hygiene Program Goals

- A. To provide comprehensive preparation of competent individuals in the arts and sciences pertinent to the discipline of dental hygiene.
- B. To provide comprehensive preparation of competent individuals in the clinical and laboratory experiences, which are necessary to develop skills in rendering professional dental hygiene patient care to the public.
- C. To provide an environment which will foster respect for the Dental Hygiene Professional Code of Ethics and Conduct and assure recognition and acceptance of the responsibilities of the profession of dental hygiene.
- D. To prepare the graduates of the basic two-year curriculum in dental hygiene to fulfill the dental hygienist's role in community oral health services.
- E. To teach students to conduct critical reviews of current literature as a means of research and life-long learning.
- F. To teach students to seek life-long learning through continuing education courses on the latest products and developments in dentistry and medicine.

DHYG 2200 PERIODONTOLOGY LEARNING OBJECTIVES

After studying the assigned chapters, students will be able to:

Chapter 1: Periodontium: The Tooth-Supporting Structures

1. Identify the tissues of the periodontium on an unlabeled drawing depicting the periodontium in cross section. (A,B,C,D)
2. Describe the function that each tissue serves in the periodontium, including the gingiva, periodontal ligament, cementum, and alveolar bone. (A,B,C,D)
3. In a clinical setting or on a color photograph, identify the following anatomical areas of the gingiva: free gingiva, gingival sulcus, interdental gingiva, and attached gingiva. (A,B,C,D)
4. In a clinical setting or on a color photograph, identify the following boundaries of the gingiva: gingival margin, free gingival groove, and mucogingival junction. (A,B,C,D)
5. In a clinical setting, identify the free gingiva on an anterior tooth by inserting a periodontal probe to the base of the sulcus. (A,B,C,D)
6. In a clinical setting, contrast the coral pink tissue of the attached gingiva with the darker, shiny tissue of the alveolar mucosa. (A,B,C,D)
7. In the clinical setting, use compressed air to detect the presence or absence of stippling of the attached gingiva. (A,B,C,D)
8. Identify the alveolar process (alveolar bone) on a human skull. (A,B,C,D)
9. Describe the position and contours of the alveolar crest of the bone in health. (A,B,C,D)
10. Describe the nerve and blood supply to the periodontium. (A,B,C,D)
11. Explain the role of the lymphatic system in the health of the periodontium. (A,B,C,D)

Chapter 2: Microscopic Anatomy of the Periodontium

1. Describe the histology of the tissues and the function that each serves in the human body. (A,B,C,D)
2. List and define the layers that comprise the stratified squamous epithelium of the skin. (A,B,C,D)
3. Define keratin and describe its function in the epithelium. (A,B,C,D)
4. Describe the composition and function of the connective tissue. (A,B,C,D)
5. Describe the epithelium–connective tissue interface found in most tissues of the body, such as the interface between the epithelium and connective tissues of the skin. (A,B,C,D)
6. Define the term *cell junction* and describe its function in the epithelial tissues. (A,B,C,D)
7. Compare and contrast the terms *desmosome* and *hemidesmosome*. (A,B,C,D)
8. Identify the three anatomical areas of the gingival epithelium on an unlabeled drawing depicting the microscopic anatomy of the gingival epithelium. (A,B,C,D)
9. Describe the location and function of the following regions of the gingival epithelium: oral epithelium, sulcular epithelium, and junctional epithelium. (A,B,C,D)
10. State the level of keratinization present in each of the three anatomical areas of the gingival epithelium (keratinized, nonkeratinized, or parakeratinized). (A,B,C,D)
11. State which of the anatomical areas of the gingival epithelium have an uneven, wavy epithelium–connective tissue interface in health and which have a smooth junction in health. (A,B,C,D)
12. Identify the enamel, gingival connective tissue, junctional epithelium, internal basal lamina, external basal lamina, epithelial cells, desmosomes, and hemidesmosomes on an unlabeled drawing depicting the microscopic anatomy of the junctional epithelium and surrounding tissues. (A,B,C,D)
13. Define and describe the function of the supragingival fiber bundles and the periodontal ligament in the periodontium. (A,B,C,D)

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14. Identify the principle fiber groups of the periodontal ligament on an unlabeled drawing. (A,B,C,D)
15. Define the terms *cementum* and *Sharpey fibers* and describe their function in the periodontium. (A,B,C,D)
16. State the three relationships that the cementum may have in relation to the enamel at the cemento-enamel junction. (A,B,C,D)
17. Define the term alveolar bone and describe its function in the periodontium. (A,B,C,D)

Chapter 3: Overview of Diseases of the Periodontium

1. Define the term *disease progression*. (A,B,C,D)
2. Define the term *periodontal disease* and contrast it with the term *periodontitis*. (A,B,C,D)
3. Describe and contrast the (1) position of the junctional epithelium, (2) characteristics of the epithelial--connective tissue junction, and (3) position of the crest of the alveolar bone in health, gingivitis, and periodontitis. (A,B,C,D)
4. Explain why there is a band of intact transseptal fibers even in the presence of severe bone loss. (A,B,C,D)
5. Describe the progressive destruction of alveolar bone loss that occurs in periodontitis. (A,B,C,D)
6. Describe the pathway of inflammation that occurs in horizontal bone loss and contrast it with the pathway of inflammation that occurs in vertical bone loss. (A,B,C,D)
7. Contrast the characteristics of gingival and periodontal pockets. (A,B,C,D)
8. For patients in the clinical setting, identify visible clinical signs of health and periodontal disease for your clinic instructor. A,B,C,D,E,F)
9. For a patient with periodontal disease, measure the probing depth of the sulci or pockets on the facial aspect of one sextant of the mouth. Using the information gathered visually and with the periodontal probe, explain whether this patient's disease is gingivitis or periodontitis. (A,B,C,D)
10. Given a drawing of a periodontal pocket, determine whether the pocket illustrated is a suprabony or infrabony pocket. (A,B,C,D)
11. Describe variables associated with periodontal disease that an epidemiologist might include in a research study. (A,B,C,D)
12. Define prevalence and incidence as measurements of disease within a population. (A,B,C,D)
13. Describe how clinical dental hygiene practice can be affected by epidemiological research. (A,B,C,D)

Chapter 4: Classification of Periodontal Diseases and Conditions

1. Name the two major categories of periodontal disease. (A,B,C,D)
2. Define and contrast the terms gingival disease, periodontal disease, and periodontitis. (A,B,C,D)
3. Explain the historical background of the periodontal classification systems. (A,B,C,D)
4. Explain the importance of a classification system for periodontal disease. (A,B,C,D)
5. List, describe, and differentiate the various periodontal diseases according to the current classification system established by the American Academy of Periodontology. (A,B,C,D)

Chapter 5: Clinical Features of the Gingiva

1. Describe characteristics of the gingiva in health. (A,B,C,D)
2. List clinical signs of gingival inflammation. (A,B,C,D)
3. Compare and contrast clinical features of healthy and inflamed gingival tissue. (A,B,C,D)
4. Explain the difference in color between acute and chronic inflammation. (A,B,C,D)
5. Differentiate between bulbous, blunted, and cratered papilla. (A,B,C,D)

6. Write a description of gingival inflammation that includes descriptors of duration, extent, and distribution of inflammation. (A,B,C,D)

Chapter 6: Diseases of the Gingiva

1. Define the two major subdivisions of gingival disease as established by the American Academy of Periodontology. (A,B,C,D)
2. Compare and contrast dental plaque-induced gingival diseases and non-plaque-induced gingival lesions. (A,B,C,D)
3. Describe the clinical signs of inflammation you would expect to find in a patient with moderate plaque-induced gingivitis. (A,B,C,D)
4. List systemic factors that may modify gingival disease. (A,B,C,D)
5. Name three types of medications that may cause gingival enlargement. (A,B,C,D)
6. Explain how the use of certain medications and malnutrition can modify gingival disease. (A,B,C,D)
7. Develop a list of suggestions for managing patients with primary herpetic gingivostomatitis. (A,B,C,D,E,F)

Chapter 7: Chronic Periodontitis

1. In a clinical setting for a patient with chronic periodontitis, describe to your clinical instructor the clinical signs of disease present in the patient's mouth. (A,B,C,D)
2. Define the term *clinical attachment loss* and explain its significance in the periodontal diseases process. (A,B,C,D)
3. In the clinical setting, explain to your patient the warning signs of chronic periodontal disease. (A,B,C,D)
4. Recognize and describe clinical and radiographic features of chronic periodontitis. (A,B,C,D)
5. Contrast the extent of periodontal destruction typically seen in localized chronic periodontitis with that of generalized chronic periodontitis. (A,B,C,D)
6. Describe the change or advancement—disease--progression typically seen in chronic periodontitis. (A,B,C,D)
7. According to the AAP 1999 classification system, define the meaning of the descriptors *recurrent chronic periodontitis* and *refractory chronic periodontitis*. (A,B,C,D)

Chapter 8: Aggressive Periodontitis

1. Compare and contrast the clinical and radiographic features of chronic periodontitis and aggressive periodontitis. (A,B,C,D,E,F)
2. In the clinical setting, explain to your patient the signs and symptoms of aggressive periodontal disease. (A,B,C,D)
3. In a clinical setting for a patient with aggressive periodontitis, describe to your clinical instructor the primary clinical signs of disease present in the patient's mouth. (A,B,C,D)
4. Compare and contrast the clinical and radiographic features of localized aggressive periodontitis and generalized periodontitis. (A,B,C,D)
5. Given the clinical and radiographic features for a patient with a history of aggressive periodontitis, determine if the disease is localized or generalized aggressive periodontitis. (A,B,C,D)

Chapter 9: Other Periodontal Conditions

1. Name and explain systemic or genetic factors that may contribute to the initiation and progression of periodontitis. (A,B,C,D)
2. Describe the impact of PMN (neutrophil) dysfunction and hematologic disorders on the periodontium. (A,B,C,D)
3. Describe clinical signs of periodontitis that may be associated with HIV infection. (A,B,C,D)
4. Describe the tissue destruction that occurs in necrotizing periodontal diseases. (A,B,C,D)
5. Compare and contrast the clinical findings of necrotizing ulcerative gingivitis and necrotizing ulcerative periodontitis. (A,B,C,D)
6. Compare and contrast the tissue destruction in chronic periodontitis with that seen in necrotizing ulcerative periodontitis. (A,B,C,D)
7. Name several local factors, such as tooth-related or mucogingival deformities, that may contribute to the initiation and progression of periodontitis. (A,B,C,D)
8. Define secondary occlusal trauma and explain how it can lead to rapid bone loss. (A,B,C,D)

Chapter 10: Guidelines For Periodontal Decision Making

1. List the three fundamental diagnostic questions used when assigning a periodontal diagnosis. (A,B,C,D)
2. Explain how to arrive at appropriate answers to each of the fundamental diagnostic questions. (A,B,C,D)
3. Explain the difference between the terms signs of a disease and symptoms of a disease. (A,B,C,D)
4. Explain the term silent disease. (A,B,C,D)
5. Describe what is meant by the term clinical attachment loss. (A,B,C,D)
6. Describe the elements of a well-written diagnosis for periodontitis. (A,B,C,D)
7. List the phases of treatment. (A,B,C,D)
8. Define the importance of informed consent to treatment planning. (A,B,C,D)
9. List guidelines for obtaining informed consent. (A,B,C,D)
10. Describe two formats for documenting informed consent. (A,B,C,D)
11. Describe the ADPIE nursing process. (A,B,C,D)
12. Explain how the ADPIE nursing process might apply to periodontal decision making. (A,B,C,D)

Chapter 11: Etiologic Factors: Risk for Periodontitis

1. Define the term biologic equilibrium and discuss factors that can disrupt the balance between health and disease in the periodontium. (A,B,C,D)
2. Define and give examples of the term “contributing risk factors”. (A,B,C,D)
3. Discuss the importance of a periodontal risk assessment in periodontal treatment planning. (A,B,C,D)
4. For a patient in your care with periodontitis, explain to your clinical instructor the factors that may have contributed to your patient’s disease progression. (A,B,C,D)

Chapter 12: Oral Biofilms and Periodontal Infections

1. Explain the difference in the cell membrane of a gram-positive versus a gram-negative bacterium. (A,B,C,D)
2. Define the term biofilm and explain the advantages of a bacterium living in a biofilm. (A,B,C,D)
3. Describe the life cycle of a biofilm. (A,B,C,D)

4. Given a drawing of a mature biofilm, label the following: bacterial microcolonies, fluid channels, extracellular slime layer, acquired pellicle, and tooth surface. (A,B,C,D)
5. Explain the significance of the extracellular slime layer and fluid channels of a biofilm. (A,B,C,D)
6. Define coaggregation and explain its significance in bacterial colonization of the tooth surface. (A,B,C,D)
7. Explain why systemic antibiotics and antimicrobial agents are not effective in eliminating dental plaque biofilms. (A,B,C,D)
8. State the most effective ways to control dental plaque biofilms. (A,B,C,D)
9. Name several reasons why newer microbe detection method has brought Socransky's microbial complexes and the specific plaque hypothesis model into question. (A,B,C,D)
10. Discuss the hypothesis that plaque biofilm is necessary but not sufficient for periodontal destruction (microbial homeostasis-host response hypothesis). (A,B,C,D)
11. Name the three bacteria designated by The World Workshop in Periodontology (1996) as periodontal pathogens. (A,B,C,D)

Chapter 13: Basic Concepts of Immunity and Inflammation

1. Define the term immune system and describe its function. (A,B,C,D)
2. Describe the role of polymorphonuclear leukocytes, macrophages, B lymphocytes, and T lymphocytes in the immune system. (A,B,C,D)
3. Contrast the terms macrophage and monocyte. (A,B,C,D)
4. Describe the three ways that antibodies participate in the host defense. (A,B,C,D)
5. Define complement system and explain its principle functions in the immune response. (A,B,C,D)
6. Describe the steps in the process of phagocytosis. (A,B,C,D)
7. Give an example of a type of injury or infection that would result in inflammation in an individual's arm. Describe and contrast the symptoms of inflammation that the individual would experience due to acute inflammation versus chronic inflammation. (A,B,C,D)
8. Define the term inflammatory mediator and give several examples of inflammatory mediators of importance in periodontitis. (A,B,C,D)

Chapter 14: Host Immune Response to Plaque Biofilm

1. Define the term host response and explain its primary function. (A,B,C,D)
2. Name factors than can enhance the microbial challenge to the periodontium. (A,B,C,D)
3. Define the term biochemical mediator and name three types of mediators. (A,B,C,D)
4. Describe the potential role of cytokines in the pathogenesis of periodontitis. (A,B,C,D)
5. Describe the potential role of prostaglandins in the pathogenesis of periodontitis. (A,B,C,D)
6. Describe the effect of increased levels of MMPs on periodontal tissues. (A,B,C,D)
7. Name the three factors than can affect host immune response. (A,B,C,D)
8. For each of the histologic stages of gingivitis and periodontitis listed below name one change in the host immune response likely to be encountered: (A,B,C,D)
Bacterial Accumulation Established Gingivitis
Early Gingivitis Periodontitis

Chapter 15: Systemic Conditions That Amplify Susceptibility to Periodontal Disease

1. Name several systemic diseases/conditions that may modify the host response to periodontal pathogens. (A,B,C,D)
2. Discuss the potential implications of these systemic diseases on the periodontium: uncontrolled diabetes, leukemia, and acquired immunodeficiency syndrome. (A,B,C,D)

3. Discuss how hormone alterations may affect the periodontium. (A,B,C,D)
4. Define the term osteoporosis and discuss the link between skeletal osteoporosis and alveolar bone loss in the jaw. (A,B,C,D)
5. Discuss the implications of Down syndrome on the periodontium. (A,B,C,D)
6. Name three medications that can cause gingival enlargement. (A,B,C,D)
7. For a patient in your care with periodontitis that is amplified by a systemic condition, explain to your clinical instructor the risk factors that may have contributed to the severity of your patient's periodontitis. (A,B,C,D)

Chapter 16: Local Factors Contributing to Periodontal Disease

1. Define the terms pathogenicity and local contributing factors. (A,B,C,D)
2. Describe local etiologic factors that contribute to the retention and accumulation of microbial plaque biofilm. (A,B,C,D)
3. Explain the meaning of the phrase "pathogenicity of plaque biofilm". (A,B,C,D)
4. Identify and differentiate the location, composition, modes of attachment, mechanisms of mineralization, and pathologic potential of supra- and subgingival calculus deposits. (A,B,C,D)
5. Describe local contributing factors that can lead to direct damage to the periodontium. (A,B,C,D)
6. Explain the role of trauma from occlusion as a possible contributing factor in periodontal disease. (A,B,C,D)

Chapter 17: Nutrition, Inflammation, and Periodontal Disease

1. Discuss the link between obesity and periodontal disease. (A,B,C,D)
2. Discuss the role of polymorphonuclear leukocytes in the production of reactive oxygen species in response to plaque biofilm. (A,B,C,D)
3. Discuss how antioxidants may influence periodontal disease onset and progression. (A,B,C,D)
4. Describe the proposed roles of micronutrients and macronutrients in periodontal disease. (A,B,C,D)
5. List some oral symptoms associated with ascorbic acid-deficiency gingivitis. (A,B,C,D)
6. Explain the role of dental healthcare providers in addressing obesity and nutrition in the management of periodontal disease. (A,B,C,D)

Chapter 18: Tobacco, Smoking, and Periodontal Disease

1. Discuss the implications of smoking/ the use of tobacco products on periodontal health status. (A,B,C,D)
2. Discuss the implications of smoking on the host response to periodontal disease. (A,B,C,D)
3. Discuss the effects of smoking on periodontal treatment outcomes. (A,B,C,D)
4. Discuss current theories as to why smokers have more periodontal disease than nonsmokers. (A,B,C,D)
5. Explain why tobacco cessation counseling is a valuable part of patient care in the dental setting. (A,B,C,D)
6. Value the importance of providing tobacco cessation counseling as a routine part of periodontal treatment. (A,B,C,D)

Chapter 19: Clinical Periodontal Assessment

1. Compare and contrast a periodontal screening examination and a comprehensive periodontal assessment. (A,B,C,D)
2. Describe how to perform one type of periodontal screening examination. (A,B,C,D)
3. List the components of a comprehensive periodontal assessment. (A,B,C,D)

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4. Describe how to evaluate each component of a comprehensive periodontal assessment. (A,B,C,D)
5. Explain how to calculate the width of attached gingiva. (A,B,C,D)
6. Explain how to calculate clinical attachment level given several different clinical scenarios. (A,B,C,D)
7. Given a clinical scenario, calculate and document the clinical attachment levels for a patient with periodontitis. (A,B,C,D)

Chapter 20: Radiographic Analysis of the Periodontium

1. Recognize the radiographic characteristics of normal and abnormal alveolar bone. (A,B,C,D)
2. Recognize and describe early radiographic evidence of periodontal disease. (A,B,C,D)
3. Distinguish between vertical and horizontal alveolar bone loss. (A,B,C,D)
4. Recognize potential etiologic agents for periodontal disease radiographically. (A,B,C,D)
5. Gain practical experience in radiographic assessment by applying information from this chapter in the clinical setting. (A,B,C,D)

Chapter 22: Nonsurgical Periodontal Therapy

1. Explain the term and name four goals for nonsurgical periodontal therapy. (A,B,C,D)
2. Write a typical plan for nonsurgical therapy for (1) a patient with plaque-induced gingivitis and (2) a patient with slight chronic periodontitis. (A,B,C,D)
3. Describe the type of healing to be expected following instrumentation of root surfaces. (A,B,C,D)
4. Explain strategies for managing dentinal hypersensitivity during nonsurgical therapy. (A,B,C,D)
5. Explain why reevaluation is an important step during nonsurgical therapy. (A,B,C,D)
6. List steps in an appointment for reevaluation of the results of nonsurgical therapy. (A,B,C,D)

Chapter 24: Supragingival and Subgingival Irrigation

1. Discuss the oral health benefits of a water flosser for the patient with periodontitis. (A,B,C,D)
2. Distinguish the depth of the delivery among the water flosser, a toothbrush, dental floss, and other interdental aids. (A,B,C,D)
3. Name the types of agents that can be used in a water flosser. (A,B,C,D)
4. In a clinical setting, instruct a patient with periodontitis in the use of water flosser. (A,B,C,D)
5. Summarize research findings that relate to using professional irrigation to deliver chemicals to periodontal pockets. (A,B,C,D)

Chapter 25: Chemical Agents in Periodontal Care

1. Describe the difference between systemic delivery and topical delivery of chemical agents. (A,B,C,D)
2. Explain the term systemic antibiotic. (A,B,C,D)
3. Explain why systemic antibiotics are not used routinely in the treatment of patients with plaque-associated gingivitis and patients with chronic periodontitis. (A,B,C,D)
4. Describe three examples of mouth rinse ingredients that can help reduce the severity of gingivitis. (A,B,C,D)

5. List three antimicrobial agents that can be delivered with controlled-release delivery devices. (A,B,C,D)
6. Explain why toothpastes are nearly ideal delivery mechanisms for chemical agents. (A,B,C,D)
7. List two toothpaste ingredients that can reduce the severity of gingivitis. (A,B,C,D)

Chapter 26: Host Modulation Therapy

1. Explain the term host modulation therapy. (A,B,C,D)
2. Explain the potential importance of host modulation therapy. (A,B,C,D)
3. Name some anti-inflammatory mediators. (A,B,C,D)
4. Name some proinflammatory mediators. (A,B,C,D)
5. List three types of drugs that have been studied for use as possible host modulating agents. (A,B,C,D)
6. Explain why low-dose doxycyclines are useful as host modulating agents. (A,B,C,D)
7. Explain the term subantibacterial dose. (A,B,C,D)
8. Make a list of treatment strategies for periodontitis patient that includes host modulation. (A,B,C,D)

Chapter 27: Periodontal Surgical Concepts for the Dental Hygienist

1. List the objectives for periodontal surgery. (A,B,C,D)
2. Explain the term relative contraindications for periodontal surgery. (A,B,C,D)
3. Define the terms repair, reattachment, new attachment, and regeneration. (A,B,C,D)
4. Explain the difference between healing by primary intention and secondary intention. (A,B,C,D)
5. Explain the term elevation of a flap. (A,B,C,D)
6. Explain two methods for classification of periodontal flaps. (A,B,C,D)
7. Describe two types of incisions used during periodontal flaps. (A,B,C,D)
8. Describe healing following flap for access and open flap debridement. (A,B,C,D)
9. Describe the typical outcomes for apically positioned flap with osseous surgery. (A,B,C,D)
10. Define the terms ostectomy and osteoplasty. (A,B,C,D)
11. Define the terms osteoinductive and osteoconductive. (A,B,C,D)
12. Explain the terms autograft, allograft, xenograft, and alloplast. (A,B,C,D)
13. Name two types of materials available for bone replacement grafts. (A,B,C,D)
14. Explain why a barrier material is used during guided tissue regeneration. (A,B,C,D)
15. Explain the term periodontal plastic surgery. (A,B,C,D)
16. List two types of crown lengthening surgery. (A,B,C,D)
17. List some disadvantages of gingivectomy. (A,B,C,D)
18. Describe the technique for gingival curettage. (A,B,C,D)
19. Explain what is meant by biological enhancement of periodontal surgical outcomes. (A,B,C,D)
20. Name two broad categories of materials used for suturing periodontal wounds. (A,B,C,D)
21. Explain the term interrupted interdental suture. (A,B,C,D)
22. List general guidelines for suture removal. (A,B,C,D)
23. Describe the technique for periodontal dressing placement. (A,B,C,D)
24. List general guidelines for periodontal dressing management. (A,B,C,D)
25. Explain the important topics that should be covered in postsurgical instructions. (A,B,C,D)
26. List steps in a typical postsurgical visit. (A,B,C,D)

Chapter 28: Periodontal Emergencies

1. Name and describe the three types of abscesses of the periodontium. (A,B,C,D)
2. List the possible causes of abscesses of the periodontium. (A,B,C,D)
3. Compare and contrast the abscess of the periodontium and the pulpal abscess. (A,B,C,D)

4. Outline the typical treatment steps for a gingival abscess and a periodontal abscess. (A,B,C,D)
5. Describe the clinical situation that can result in a pericoronal abscess. (A,B,C,D)
6. Outline the typical treatment for a pericoronal abscess (pericoronitis). (A,B,C,D)
7. Describe the characteristics of necrotizing ulcerative gingivitis. (A,B,C,D)
8. Outline the typical treatment steps for necrotizing ulcerative gingivitis. (A,B,C,D)
9. Describe the symptoms of primary herpetic gingivostomatitis. (A,B,C,D)

Chapter 30: Maintenance for the Periodontal Patient

1. Explain the term periodontal maintenance. (A,B,C,D)
2. List three objectives of periodontal maintenance. (A,B,C,D)
3. Describe how periodontal maintenance relates to other phases of periodontal treatment. (A,B,C,D)
4. List the usual procedures performed during a patient appointment for periodontal maintenance. (A,B,C,D)
5. Explain the term baseline data. (A,B,C,D)
6. Describe guidelines for determining whether the general practice office or the periodontal office should provide periodontal maintenance. (A,B,C,D)
7. Describe how to establish an appropriate interval between maintenance appointments. (A,B,C,D)
8. Define the term recurrence of periodontitis. (A,B,C,D)
9. List clinical signs of recurrence of periodontitis. (A,B,C,D)
10. List reasons for recurrence of periodontitis. (A,B,C,D)
11. Explain the term compliance. (A,B,C,D)
12. Define the terms compliant patient and noncompliant patient. (A,B,C,D)
13. List reasons for noncompliance with periodontal maintenance recommendations. (A,B,C,D)
14. Explain some strategies that can be used to improve patient compliance. (A,B,C,D)
15. Explain the term root caries. (A,B,C,D)
16. List recommendations for use of fluorides in the prevention of root caries. (A,B,C,D)

Chapter 31: Periodontal Maintenance of Dental Implants

1. Describe the components of a typical dental implant and restoration. (A,B,C,D)
2. Compare and contrast the periodontium of a natural tooth with the peri-implant tissues that surround a dental implant. (A,B,C,D)
3. Define the terms osseointegration and biomechanical forces as they apply to dental implants. (A,B,C,D)
4. Compare and contrast the terms peri-implant mucositis and peri-implantitis. (A,B,C,D,E,F,)
5. Discuss the special considerations for periodontal instrumentation of a dental implant. (A,B,C,D)
6. Describe an appropriate maintenance interval for a patient with dental implants. (A,B,C,D)
7. In the clinical setting, select appropriate self-care aids for a patient with dental implants. (A,B,C,D)

Chapter 32: Periodontal-Systemic Associations

1. Contrast the terms “association” and “cause” between a given factor (A) and a systemic disease (B). (A,B,C,D)
2. Educate patients at risk for cardiovascular diseases about the possible impact of periodontal infection on cardiovascular health and encourage oral disease prevention and treatment services. (A,B,C,D)
3. Educate pregnant women and those planning pregnancy regarding the possible impact of periodontal infection on pregnancy outcomes and encourage preventive oral care and treatment services. (A,B,C,D)

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4. Educate patients with diabetes about the probable bidirectional association between periodontal disease and diabetes; encourage oral disease prevention and treatment services. (A,B,C,D)
5. Educate family members and caregivers about the association between periodontal disease and pneumonia in health-compromised seniors in hospitals and long-term care. (A,B,C,D)
6. Establish collaborative relationships with other healthcare providers to insure the highest standard of care for periodontal patients with systemic diseases and conditions. (A,B,C,D)

Chapter 36: Comprehensive Patient Cases

1. Apply the content from the chapters in this book to the decision-making questions for Fictitious Patient Cases 1, 2, 3, 4, and 5. (A,B,C,D)

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5-22 Mon Session 1A	Chapter 1	First day of class/Introduction to Course—Syllabi, Rules, Regulations. Ch 1 Periodontium: The Tooth-Supporting Structures <ul style="list-style-type: none"> • Discussion with PPTS • Group Work: Clinical Patient Care Text Case Studies • Class Activity: Identification of anatomical areas of the gingiva • Review Questions Quiz • Role Play: The Good Mother 	Retrieve any materials for class from the M: Drive Discuss PPT Project/Groups/ Selection of topic Read assigned chapters prior to class.	CC 1 GC a,c	C 3,4,7 HP 4,5 PC 1-7
5-22 Mon Session 1B	Chapter 2-3	Ch 2 Microscopic Anatomy of the Periodontium Ch 3 Overview of Diseases of the Periodontium <ul style="list-style-type: none"> • Discussion with PPTS • Group Work: Clinical Patient Care Text Case Studies • Worksheets: Gingival Epithelium; Fiber Bundles; Fiber Groups; Supra/Infra bony pockets. • Prevalence/ Incidence Partner Activity • Facts about Plaque and Periodontal Disease T/F Quiz • Review Questions Quiz 	Read assigned chapters prior to class.	CC 1- 3 GC a,c	C 4 HP 4,5 PC 2,3

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		<ul style="list-style-type: none"> • Role Play: Blind Singer 			
<p>5-29 No Class</p>	<p>MEMORIAL DAY HOLIDAY</p>	<p style="text-align: center;">MEMORIAL DAY</p> 	<p>MEMORIAL DAY HOLIDAY</p>		
<p><u>5-30</u> <u>Session 2A</u> <u>Tues</u> <u>SPECIAL</u> <u>DAY</u> <u>and TIME</u></p> <p><u>Lunch</u> <u>12:10-</u> <u>12:40</u></p> <p><u>Class</u> <u>12:40-5:20</u></p>	<p>Chapter 4-5</p>	<p>Ch 4 Classification of Periodontal Diseases and Conditions</p> <p>Ch 5 Clinical Features of the Gingiva</p> <ul style="list-style-type: none"> • Discussion with PPTS • Group Work: Clinical Patient Care Text Case Studies • Gingivitis/ Periodontitis Activity • PPT Exercise: Identify Gingival Conditions • Class Discussion/Board Activity: Compare/Contrast Healthy Gingiva and Inflamed Gingiva • Discussion of Periodontal Diagnostic Guidelines and Therapeutic Interventions and Goals • Review Questions Quiz • Role Play: The Patient From Another Office 	<p>Read assigned chapters prior to class.</p> <p style="text-align: center;"><u>Ethics Exercise Completed with Peer Partner Due Today: “A Great Boss”</u></p> <p style="text-align: center;"><u>Bring one completed Ethics Framework to class.</u></p> <p>*Retrieve Ethics Framework Guideline and Rubric <i>from M: Drive Ethics Folder</i> to use for this assignment.</p>	<p>CC 1-3</p> <p>GC a,c</p>	<p>C 3,4,7</p> <p>HP 4, 5</p> <p>C 2, 3</p>

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<p><u>5-30</u> <u>Session 2B</u> <u>Tues</u> <u>SPECIAL</u> <u>DAY</u> <u>and TIME</u></p> <p><u>Lunch</u> <u>12:10-</u> <u>12:40</u></p> <p><u>Class</u> <u>12:40-5:20</u></p> <p><u>Thomson</u> <u>Case</u> <u>Studies in</u> <u>Dental</u> <u>Hygiene</u> <u>Text</u></p>	Chapter 6-7	<p>Ch 6 Diseases of the Gingiva Ch 7 Chronic Periodontitis</p> <ul style="list-style-type: none"> • Discussion with PPTS • Group Work: Clinical Patient Care Text Case Studies • Individual Exercise: Compare/Contrast Plaque-Induced and Non-plaque Induced Gingival Disease • Group Activity: Compare Chronic, Aggressive, and Less Common Types of Periodontitis • Class Discussion: Localized versus Generalized Chronic • Compare/Contrast Refractory/Recurrent Periodontitis • Review Questions Quiz • Role Play: The Russian Immigrant 	<p>Read assigned chapters prior to class.</p> <p style="text-align: center;"><u>Chapter 6 Case D</u> <u>Periodontal patient due</u></p>	<p>CC 2,3 GC a,c</p>	<p>C 3,4,7 HP 4,5 PC 2,3</p>
<p>6-05 Mon Session 3A</p>	Chapter 8-9	<p>Ch 8 Aggressive Periodontitis Ch 9 Other Periodontal Conditions</p> <ul style="list-style-type: none"> • Discussion with PPTS • Group Work: Clinical Patient Care Text Case Studies • Compare/Contrast Two Types of Aggressive Periodontitis • Activity: DHCP for a 	<p>Read assigned chapters prior to class.</p>	<p>CC 2,3 GC a,c</p>	<p>C 3,4,7 HP 4,5 PC 2,3</p>

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Date	Chapter / Lesson	Content	Assignments/ Tests	COMP AREA	ADEA
		<p>Mock Patient with Aggressive Periodontitis</p> <ul style="list-style-type: none"> • Gingival Conditions PPT Exercise • Activity: Mock Treatment Plan for NUG and NUP patient • Class Activity: Compare/Contrast NUG and NUP • Identify Clinical Signs of Disease using Textbook Photos • Review Questions Quiz • Role Play: Well-Read Patient 			
6-05 Mon Session 3B	Chapter 10	<p>Ch 10 Guidelines for Periodontal Decision Making</p> <ul style="list-style-type: none"> • Discussion with PPTS • Group Work: Clinical Patient Care Text Case Studies • Paired Activity: Three Fundamental Diagnostic Questions • ADPIE group discussion • Review Questions Quiz 	Read assigned chapters prior to class.	CC 2,3,4 GC a,c	C 3,4,7 HP 4,5 PC 2,3
6-12 Mon Session 4A	Chapter 11	<p>Ch 11 Etiologic Factors: Risk for Periodontitis</p> <ul style="list-style-type: none"> • Discussion with PPTS • Group Work: Clinical Patient Care Text Case Studies • Discuss/Review Perio Risk Assessment Forms • Activity: Biologic 	Exam 1 Chs 1-10 Read assigned chapters prior to class.	CC 1-4 GC a, c	C 3,4,7 HP 4,5 PC 2,3

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		<p>Equilibrium and Risk Factors which disrupt that balance</p> <ul style="list-style-type: none"> • Activity: Biologic Pathways that link Periodontitis and Cardiovascular Disease • Review Questions Quiz • Role play: The Migrant Mother 			
<p>6-12 Mon Session 4B</p> <p><u>Thomson Case Studies in Dental Hygiene Text</u></p>	<p>Chapter 12-13</p>	<p>Ch 12 Oral Biofilms and Periodontal Infections Ch 13 Basic Concepts of Immunity and Inflammation</p> <ul style="list-style-type: none"> • Discussion with PPTS • Group Work: Clinical Patient Care Text Case Studies • Gram + Gram - Group Activity • Bacteria Resistant Antibiotics Online Research Partner Activity • Discussion: Ways Antibodies Participate in the Host Defense • Review Questions Quiz 	<p>Read assigned chapters prior to class.</p> <p><u>Chapter 8 Case F Periodontal and infective endocarditis patient</u></p>	<p>CC 2,3 GC a, c</p>	<p>C 3,4,7 HP 4,5 PC 2,3</p>
<p>6-19 Mon Session 5A</p>	<p>Chapter 14</p>	<p>Group PPT Project Presentations Today Ch 14 Host Immune Response to Plaque Biofilm</p> <ul style="list-style-type: none"> • Discussion with PPTS • Group Work: Clinical Patient Care Text Case Studies 	<p>Read assigned chapters prior to class.</p> <p><u>Periodontal Surgeries Group Projects/ Presentations Due Handout Due</u></p>	<p>CC 2,3,5 GC a, c</p>	<p>C 3,4,7 HP 4,5 PC 2,3</p>

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		<ul style="list-style-type: none"> • Gingival Conditions PPT Exercise • Review Questions Quiz • Role Play: The Appliance Technician 			
6-19 Mon Session 5B	Chapter 15-16	<p>Ch 15 Systemic Conditions That Amplify Susceptibility to Periodontal Disease</p> <p>Ch 16 Local Factors Contributing to Periodontal Disease</p> <ul style="list-style-type: none"> • Discussion with PPTS • Group Work: Clinical Patient Care Text Case Studies • Exercise: Effects of Medication on the Periodontium • PPT Activity: Local Contributing Factors • Review Questions Quiz • Role Play: The Anxious Patient 	Read assigned chapters prior to class.	CC 2,3,5 GC a, c	C 3,4,7 HP 4,5 PC 2,3,5,6
6-26 Mon Session 6A	Chapter 17-18	<p>Ch 17 Nutrition, Inflammation, and Periodontal Disease</p> <p>Ch 18 Tobacco, Smoking, and Periodontal Disease</p> <ul style="list-style-type: none"> • Discussion with PPTS • Group Work: Clinical Patient Care Text Case Studies • List Oral Symptoms of Scurvy and Vit. C Deficiency 	Read assigned chapters prior to class.	CC 1,2,3 GC a, c	C 3,4,7 HP 4,5 PC 2,3,5,11,12,13

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		<ul style="list-style-type: none"> • Scurvy Video • Class Discussion: Effects of Smoking on Oral and General Health • Tobacco Cessation Competency Form Discussion • Tobacco Cessation Worksheet • Review Questions Quiz • Role Play: The Worn Out Teeth 			
<p>6-26 Mon Session 6B</p>	<p>Chapter 19-20</p>	<p>Ch 19 Clinical Periodontal Assessment Ch 20 Radiographic Analysis of the Periodontium</p> <ul style="list-style-type: none"> • Discussion with PPTS • Group Work: Clinical Patient Care Text Case Studies • Activities: Furcation ID and CAL Calculation • PPT ID Radiographic Quiz Periodontal Anatomy • Review Questions Quiz • Role Play: The Crooked Teeth 	<p>Read assigned chapters prior to class.</p>	<p>CC 1,4 GC a, c</p>	<p>C 3,4,7 HP 4,5 PC 2,3,5</p>
<p>7-3 Mon NO CLASS</p>	<p>JULY</p>	<p>4th </p>	<p>HOLIDAY WEEK</p>		

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Summer Semester 2017

Date	Chapter / Lesson	Content	Assignments/ Tests	COMP AREA	ADEA
7-10 Mon Session 7A	Chapter 22 and 24	Ch 22 Nonsurgical Periodontal Therapy Ch 24 Supragingival and Subgingival Irrigation <ul style="list-style-type: none"> • Discussion with PPTS • Group Work: Clinical Patient Care Text Case Studies • NSPR Gradesheet/Local Anesthesia Consent Form Discussion • Recall Interval Discussion/Rationale • Activity: Nonsurgical Perio Therapy Goals • Discussion: Deplaque vs. Debride • Oraqix Group Activity • Dental Floss/Dental Water Jet Comparison • Review Questions Quiz 	<p style="text-align: center;">Exam # 2 (chapters 11-20)</p> Read assigned chapters prior to class.	CC 4,5 GC a, c	C 3,4,7 HP 4,5 PC 2,3,5

DHYG 2200 Periodontology
Monday 10:00-12:20pm (A Sessions) and 1:10-3:30pm (B Sessions)
Lesson Plan
Summer Semester 2017

Date	Chapter / Lesson	Content	Assignments/ Tests	COMP AREA	ADEA
7-10 Mon Session 7B NO CLASS NEXT MONDAY 7/17/17	Chapter 25-26	Ch 25 Chemical Agents in Periodontal Care Ch 26 Host Modulation Therapy <ul style="list-style-type: none"> • Discussion with PPTS • Group Work: Clinical Patient Care Text Case Studies • Group Activity: Methods of Delivering Chemical Agents /Host Modulating Agents • Paired Activity: Chemotherapeutic Agents and Methods of Use for Various Patients • Review Questions Quiz • Review of Arestin Skill Evaluation and Arestin product information 	Read assigned chapters prior to class. Prepare for your Arestin Skill Evaluation for next Session. Familiarize yourself with product material uses and contraindications.	CC 4,5 GC a, c	C 3,4,7 HP 4,5 PC 2,3,5

DHYG 2200 Periodontology
Monday 10:00-12:20pm (A Sessions) and 1:10-3:30pm (B Sessions)
Lesson Plan
Summer Semester 2017

Date	Chapter / Lesson	Content	Assignments/ Tests	COMP AREA	ADEA
7-24 Mon Session 8A	Chapter 27-28	<p>Special Guest Speaker: Marie Markesbery, Orapharma/Arestin</p> <p>Ch 27 Periodontal Surgical Concepts for the Dental Hygienist Ch 28 Periodontal Emergencies</p> <ul style="list-style-type: none"> • Discussion with PPTS • Group Work: Clinical Patient Care Text Case Studies • Activity: Healing Process • Comparison of Wound Closure Types • Practice Periodontal Dressing Placement • Bone Graft/Periodontal Surgery Discussion • Types of Infections • NUG and PHG • New Periodontal Technology Discussion • 3 Videos: Frenectomy & Gingivoplasty & An Intro to Periodontal Surgery for the Dental Hygienist • Review Questions Quiz • Arestin Skill Evaluations with Mrs. DeFore and Mrs. Bryson 	<p>Read assigned chapters prior to class.</p> <p>Typodont Application Of Demo Product Packets from Arestin</p> <p>Locally Administered Antimicrobial Application of Minocycline Microspheres – Arestin</p> <p><u>mmarkesbery@orpharma.com</u> (OraPharm Rep.)</p>	CC 5,6 GC a, c	C 3,4,7 HP 4,5 PC 2,3,5

DHYG 2200 Periodontology
Monday 10:00-12:20pm (A Sessions) and 1:10-3:30pm (B Sessions)
Lesson Plan
Summer Semester 2017

Date	Chapter / Lesson	Content	Assignments/ Tests	COMP AREA	ADEA
7-24 Session 8B	Chapter 30-32	<p>Chapter 30 Maintenance for the Periodontal Patient</p> <p>Chapter 31 Periodontal Maintenance of Dental Implants</p> <p>Chapter 32 Periodontal-Systemic Associations</p> <ul style="list-style-type: none"> • Discussion with PPTS • Group Work: Clinical Patient Care Text Case Studies • Parts of a Dental Implant Activity Sheet • Implant Infections • <i>Video: Implants</i> • <i>Video: Maxillary Torus Laser Removal</i> • <i>Suture removal activity from sutured hotdogs</i> • Role Play: Non-Compliant Patient • Review Questions Quiz 	Read assigned chapters prior to class.	CC 4,5,6 GC a,c	C 3,4,7 HP 4,5 PC 2,3,5,6
7-26 Weds SPECIAL DAY Session 9A and 9B	Chapter 36 CASE STUDIES	<p>COMPREHENSIVE PATIENT CASES</p> <p>Review for FINAL</p>	<p>Exam # 3 (chapters 22-32 omitting chapters 23, 29)</p> <p>UCLA PPT or AAPs Periodontal Classifications by Photo</p>	CC 1-6 GC a, c	C 3,4,7 HP 4,5 PC 2,3,5,6
FINAL Mon 7/31 8:00am	Chapters 1-32	Comprehensive Final Examination Chs. 1-32 Omitting CHS. 21, 23, 29	Exam # 4 Comprehensive Final Examination	CC 1-6 GC a, c	C 3,4,7 HP 4,5

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Monday 10:00-12:20pm (A Sessions) and 1:10-3:30pm (B Sessions)
Lesson Plan
Summer Semester 2017

Date	Chapter / Lesson	Content	Assignments/ Tests	COMP AREA	ADEA
					PC 2,3,5,6

This lesson plan is subject to change at the discretion of the instructor.

MAJOR COURSE COMPETENCIES (CC)

1. Tissues of the Periodontium
2. Periodontal Pathology
3. Periodontal Diseases
4. Assessment and Treatment Planning
5. Periodontal Disease Therapy
6. Periodontal Emergencies

GENERAL CORE COMPETENCIES (GC)

- a. The ability to utilize standard written English.
- b. The ability to solve practical mathematical problems.
- c. The ability to read, analyze, and interpret information.



Appendix A

Power Point Presentation Title _____ Date: _____

SELF ASSESSMENT CHECKLIST

Group members: _____

CATEGORY

RESPONSIBILITIES OF STUDENTS

Content

- The information we gave was interesting or important to others.
 - We each were well informed of all our topic information and each contributed equally to the project.
 - We included reliable, factual information, and not our opinion.
 - We added supportive detail to the main point(s).
 - We had a **minimum of 10 slides in our PPT**; the title slide and reference slide counting as two separate slides.
-

Organization

- We organized ideas in a logical way.
 - The information and arguments/details were easy to understand.
 - We stayed focused and did not get off the topic.
 - The introduction included a clear statement of the main point(s).
 - The body of the presentation contained supportive details about the main point(s).
 - We included a strong conclusion in our presentation.
-

Visual Aids

And Technology Use

- Pictures and graphics improved the presentation or reinforced main points.
- Pictures, graphics and their placement were creative.
- Presentation was attractive.
- Letters and fonts were easily viewed and read by the entire audience.

- Slides contained no spelling or grammatical errors.

Delivery

- We maintained eye-contact most of the time.
 - We spoke to the entire audience, not just one or two people and everyone could hear us clearly.
 - We didn't speak too fast or too slow. We used our **10 minute time parameter**.
 - We used standard grammar; limited pauses, and limited the use of "um", "and like", "and you know", etc.
 - We referred to notes, but never read directly from them.
-

Resources

- We used resources that addressed the topic.
 - We used authentic print resources.
 - We used interviews with others as a resource (if applicable).
 - We used our own words in the speech; we didn't copy all the words or read verbatim from slides or notes.
-

PowerPoint Presentation Grading Rubric

Student's Name: _____

Group Project Topic: _____

Title of Presentation: _____

CATEGORY	Excellent-4	Good-3	Satisfactory-2	Needs Improvement-1
Content - Accuracy	All content throughout the presentation is accurate. There are no factual errors.	Most of the content is accurate but there is one piece of information that seems inaccurate.	The content is generally accurate, but one piece of information is clearly inaccurate.	Content confusing or contains more than one factual error.
Sequencing of Information	Information is organized in a clear, logical way. It is easy to anticipate the next slide.	Most information is organized in a clear, logical way. One slide or piece of information seems out of place.	Some information is logically sequenced. An occasional slide or piece of information seems out of place.	There is no clear plan for the organization of information.
Effectiveness	Project includes all material needed to give a good understanding of the topic. The project is consistent with the driving question.	Project is lacking one or two key elements. Project is consistent with driving question most of the time.	Project is missing more than two key elements. It is rarely consistent with the driving question.	Project is lacking several key elements and has inaccuracies. Project is completely inconsistent with driving question.
Use of Graphics	All graphics are attractive (size and colors) and support the topic of the presentation.	A few graphics are not attractive but all support the topic of the presentation.	All graphics are attractive but a few do not support the topic of the presentation.	Several graphics are unattractive and detract from the content of the presentation.

Text - Font Choice & Formatting	Font formats (color, bold, italic) have been carefully planned to enhance readability and content.	Font formats have been carefully planned to enhance readability.	Font formatting has been carefully planned to complement the content. It may be a little hard to read.	Font formatting makes it very difficult to read the material.
Spelling and Grammar	Presentation has no misspellings or grammatical errors.	Presentation has 1-2 misspellings, but no grammatical errors.	Presentation has 1-2 grammatical errors but no misspellings.	Presentation has more than 2 grammatical and/or spelling errors.
Cooperation	Group shares tasks and all performed responsibly all of the time.	Group shares tasks and performed responsibly most of the time.	Group shares tasks and performs responsibly some of the time.	Group often is not effective in sharing tasks and/or sharing responsibility.

Delivery	Members spoke at a good rate, volume and with good grammar. They maintained eye-contact while using, but not reading their notes.	Members spoke a little faster or slower than necessary, or too quietly or loudly. They used acceptable grammar. They maintained eye-contact, but relied too much on their notes.	Members spoke at a good rate and volume, but used poor grammar. They relied heavily on their notes.	Members demonstrated having paid little attention to rate, volume or grammar. They read nearly word for word from notes.
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Total Points Earned out of a Possible 32 points (8 categories/ 4 points each =32 (A/100)

Comments:

Instructor Signature: _____



Appendix C

DHYG 2200 Periodontology

Locally Administered Antimicrobial Minocycline Microspheres – Arestin Skill Evaluation

Student:	Score:
Instructor:	Date:
Skill on Typodont	Time Limit: 15 minutes

Evaluation Mechanism			
Symbol	Meaning	Grade	All evaluation criteria must be achieved/performed.
•	Criterion Met	100%	Attempt #1 = 100 Final Attempt #2 = 70
0	Criterion Not Adequately Met Student Must Remediate and Attempt again	0%	

Evaluation Item	Self	Peer	Instructor
1. All PPE in place. Assembles complete armamentarium and checks equipment. No rubrics or guidelines are allowed to be viewed during any Skill Evaluation. Skill Evaluation form is filled out completely with Self and Peer Columns, Peer comment and Student/Date/Patient Information.			
2. Determines the need for controlled-released minocycline microspheres therapy (indicated for the reduction of pocket depth in sites 5mm not responding to mechanical therapy alone in persons with chronic periodontitis).			
3. Evaluates contraindications to and precautions for treatment.			
4. Explains risks and benefits and alternative to treatment. Obtains informed consent.			
5. Removes number of unit-dosed cartridges needed for treatment.			
6. Inserts cartridge into sterile cartridge handle to administer the product, and follows manufacturer’s directions.			
7. Bends cartridge tip to improve access to diseased sites. Insert tip of cartridge subgingivally to base of pocket; tip should be parallel to long axis of tooth. Presses thumb ring to express powder while gradually withdrawing tip from base of pocket.			
8. Does not force tip into base of periodontal pocket. Demonstrates controlled administration of medication.			
9. Discards cartridge and prepares cartridge handle for sterilization.			
10. Documents services rendered in patient’s chart. Records specific sites where microspheres are placed. (Minocycline microspheres placed in sites not responding to mechanical debridement alone for the reduction of pocket depths: list tooth numbers).			
11. Explains post-treatment care. (Delay brushing for first 12 hours after treatment; abstain from interdental cleaning in area; do not eat hard, crunchy, or sticky foods for 10 days).			

Rev. 5/9/17 lvd

12. Schedules reevaluation and/or reapplication at NSPR appointment. Sites of Arestin placement will be checked at the NSPR visit or no credit for Arestin placement therapy will be given. NSPR APPOINTMENT DATE IS: _____			
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